

#### CALIFORNIA NURSE WORKFORCE INITIATIVE

#### **Early Process Report: Implementation of Project Initiatives**

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July 8, 2004

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This evaluation is funded by the Employment Development Department, California Health and Human Services Agency, through the School of Nursing, UCSF. The statements contained in this report are solely those of the authors and do not necessarily reflect the views or policies of the California Employment Development Department or of the University of California.

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#### I. Project Background

In recent years, much attention has been focused on the shortage of registered nurses (RNs) that has been reported throughout California, the U.S. and in many other developed countries (Buerhaus 2001; Murray, 2002; Spetz and Given, 2003). California's nursing shortage is among the most severe in the United States (U.S. Bureau of Health Professions, 2002). The California Employment Development Department (EDD) predicts that there will be 97,500 job openings for RNs by 2010 (California Employment Development Department, 2003).

In response to the nursing shortage in California, Governor Gray Davis announced the Nurse Workforce Initiative (NWI) in January 2002 and made available \$60 million. Funding for this initiative is from the federal Workforce Investment Act (WIA) over a three-year period (California Health and Human Services Agency (CHHS) 2002).

The overall purpose of the NWI is to increase the supply of nurses in California. The initiative sought applicants who would develop and implement proposals to recruit, train, and retain registered nurses (RNs) and Licensed Vocational Nurses (LVNs), both to address the current shortage of nurses in California and to support legislation on nurse-to-patient staffing ratios in hospitals that was implemented in January 2004.

The Governor's initiative outlined multiple approaches designed to address the nurse shortage. Current NWI funding of approximately \$26 million includes support for 22 projects including regional training collaboratives (RTCs), pilot projects focused on workplace reform (WR), and efforts to create on-site career ladders (OCLs), which provide nursing education at the worksite. It also includes an evaluation of the initiative, to determine which strategies to increase the supply of nurses are most effective and to improve our understanding of the labor market dynamics for nurses. The evaluation contract was awarded to the University of California at San Francisco (UCSF) and the University of California at Los Angeles (UCLA).

#### II. Evaluation Goals and Objectives

#### Evaluation Goals

The goals of the NWI are to:

- ➤ Ensure that California's communities have sufficient nurses necessary for all levels of care for California's population, and
- Ensure that hospitals facing the need for additional nurses due to the recently announced staffing ratio regulations have access to well-trained nurses.

#### Evaluation Objectives

The objectives of the NWI program evaluation are:

- To determine whether the various NWI strategies were effective in increasing recruitment, training, and retention of nurses,
- > To determine whether the NWI developed and implemented effective career ladders for nurses,
- ➤ To determine whether NWI strategies contributed to improved work environments for nurses and other staff,
- > To develop a better understanding of the labor market for nurses including the manner by which external policy and other factors affect the market, and
- To suggest improvements in the program's design and operation, and to suggest improvements in California's efforts to train and retain health workers.

#### III. Report Outline

This report provides preliminary information on the implementation of the regional collaboratives, workplace reform, and on-site career ladder projects. This report also includes preliminary findings based upon initial site visits and interviews with each of the funded projects. More detailed analyses and conclusions will be developed and included in future reports. The first section includes an overview of each of the 22 NWI projects. Table 1 summarizes the type of programmatic approaches the projects are taking to increase the supply of nurses. The following section includes discussion of the first focal site visits. Next, data are summarized for the Early Departure Surveys conducted to date. Data from the Participant Baseline Surveys are included in the next section and general findings, to date, are discussed. The final section of the report includes a discussion of early findings regarding implementation and early successes and challenges of the NWI.

#### IV. Methods Used in Process Evaluation

The early process evaluation included both qualitative and quantitative approaches. First, we conducted an initial telephone interview with each of the 22 funded projects. Between February and July of 2003, evaluation team members contacted each grantee to identify or verify the appropriate contact individuals for each grant. During the period of August 2003 through March 2004, the evaluation team conducted initial telephone interviews with every NWI grant coordinator to explicate and finalize the work of each grantee. In preparation for each interview, a team member reviewed the grant's proposal and stated scope of work. The team then developed and delivered, in advance of the telephone interview, a customized set of interview questions based on the proposed strategies, partners, and activities of each grant. In a few cases, the project coordinator was unable to answer specific questions about the strategies and activities of project partners. In these cases, the evaluation team followed up by telephone or with a brief customized questionnaire to the relevant partners. A sample interview guide is included in Appendix A.

#### Focus Site Visits

Evaluation resources allowed the team to select four sites from among the 22 projects for indepth focused analyses. Criteria for selecting the four sites included geographic representation within California, variation in program approach as assessed in the initial proposals, and not being selected as a focus site during the Caregiver Training Initiative (CTI--a previous WIA-funded program involving many of the same collaboratives). The NWI programs selected for focused review were the North Bay Employment Connection (NBEC), the Orange County collaborative, the San Diego Workforce Partnership, and the West Hills Community College District.

The goal of the early focus site visit was to gain a clear understanding of all the elements and partners involved in the program, meet key staff and faculty, identify unique program features, and discuss early successes and challenges in program implementation. In addition, we asked interviewees if they had suggestions for improvement in the implementation or operation of the overall program. The evaluation team conducted site visits at the focus sites between November 2003 and March 2004. Team members reviewed each grantee's original proposal, scope of work, and notes from the initial telephone interview to draft interview questions for the focus site visit. The team then worked with each site's project coordinator to refine both the interview guides and the interviewee list. Due to the uniqueness of each site's program, the interview guides and interviewees differed from site to site.

Once the interviewee lists were confirmed and interview guides completed, team members worked independently or in partnership with the grant's project coordinator to schedule the interviews over a two to three day period. Two evaluation team members conducted each site visit, pairing up for key interviews and conducting other interviews one-on-one. Twelve to seventeen interviews were conducted at each site.

#### Participant Baseline Survey

Quantitative data included in this Early Process Report include baseline information on all participants as of January 2004, collected in a site-administered Participant Baseline Survey consisting of 15 items. Items include demographic data, nursing program enrollment, hours worked in the past year, previous work and education in health care and non-health care, intent to work during training, and types of supportive services and assistance needed and received. A complete copy of the Participant Baseline Survey is included in Appendix B.

#### Early Departure Survey

As part of the evaluation plan, the project team conducts a telephone survey with participants who leave the training program prior to completion of their program. The Early Departure Survey includes basic demographic items, questions about the type of program in which the participant was enrolled, and reasons for leaving the program. A complete version of the Early Departure Survey is included in Appendix C. Contact information for every "early departure" individual is sent to the evaluation team. A team member contacts the individual prior to the survey interview and obtains informed consent for voluntary participation. Once the survey interview is complete, the responses (without identifying information) are recorded on a spreadsheet for future analysis.

#### V. Overview of NWI Projects

The following section includes descriptive information on each of the 22 funded regional training collaborative (RTC), workplace reform (WR), and on-site career ladder (OCL) projects. This information was obtained from the grant proposals, the initial telephone interviews, and follow up interviews with key partners. Individual site descriptions are followed by a summary of the various program approaches, specifically: 1) Creating new training slots by adding new educational programs or expanding slots in existing programs, 2) Reducing attrition from existing educational programs, 3) Increasing National Council Licensure Examination (NCLEX) pass rates, 4) Decreasing turnover among working licensed nurses, and 5) Increasing re-entry among non-practicing nurses/internationally-trained nurses.

#### 1) East Bay Works

**Partners:** Richmond Works (fiscal agent), Alameda Workforce Investment Board (WIB), Oakland Private Industry Council (PIC), and Contra Costa Workforce Investment Board (WIB).

Goals: 60 Associate Degrees in Nursing (ADNs), and 20 Licensed Vocational Nurses (LVNs).

Strategies: Each partner has independently designed a strategy, but collectively the partners' strategies focus on reducing attrition due to financial or other barriers during nursing school and early in the nursing career. Richmond Works is providing scholarships and other support to students already enrolled in LVN or ADN programs. Alameda has designed a program to ease transition from nursing school, providing ADN students in their final year of study with work-study experience, preceptors (someone who mentors at the worksite), additional classroom study aimed at increasing their clinical skills, and preparation for full-time nursing. Alameda is also supporting incumbent certified nurses assistants (CNAs) pursuing LVN degrees. Both the city of Oakland and Contra Costa County are working with local health care providers to select and support incumbent workers completing LVN and ADN programs. All partners work directly with NWI participants and only casually, if at all, with educators. East Bay Works NWI participants attend regional occupation programs (ROPs), adult schools, private and public 4-year colleges, and community colleges throughout the Bay Area, as well as a "Virtual College" that offers only online programs.

#### 2) Fresno Work Investment Board

**Partners:** Fresno WIB (fiscal agent), Kaiser Permanente, and Service Employees International Union (SEIU) Local 250/Shirley Ware Education Center.

**Goals:** A total of 40 Kaiser Permanente employees will complete or be in the process of completing LVN (10) or RN (30) training.

Strategies: The Fresno NWI grant is designed to reduce nursing school attrition, but is also closely aligned with an effort by its partner, Kaiser Permanente, to increase nursing school capacity. Kaiser Permanente is contributing approximately \$225,000 to this effort in the form of direct increased capacity at Fresno City College, tuition reimbursement, paid release time, and staff support. Fresno provides tuition and support services to Kaiser Permanente employees accepted to the Fresno City College ADN program as a result of the increased capacity made possible by the Kaiser Permanente funds. In addition, NWI funds are being used to provide tuition and other support to Kaiser Permanente employees accepted to LVN and ADN programs at local community colleges and vocational schools, as well as the Bachelor of Science in Nursing (BSN) Program at California State University Stanislaus at Turlock. Kaiser Permanente and the Fresno WIB have committed to continuing support for the students who have not completed training by the end of the grant period.

#### 3) Hollywood WorkSource/Cedars-Sinai Medical Center

**Partners:** Los Angeles City WIB (fiscal agent only), Hollywood WorkSource, and Cedars-Sinai Medical Center Institute for Professional Nursing Development (IPND).

Goals: 60 ADNs, 15 LVNs.

Strategies: This grant addresses both nursing school capacity and attrition. IPND is coordinating with other health care providers in the area to fund faculty time at Santa Monica City College, LA Trade Technical College, and LA Valley College in order for NWI participants seeking ADN and LVN degrees to bypass the schools' waiting lists. These participants are both incumbent workers at partner healthcare facilities and individuals recruited from the community. They receive tuition support, support for books, and other services to help them complete nursing education. An NCLEX review course is being negotiated with Kaplan Review for 22 graduates of U.S. and international RN programs. The target group consists of individuals who have failed the NCLEX-RN exam once, as well as new domestic and international graduates. Cedars-Sinai provides a wide range of services, including an on-site career advisor, to its newly graduated nurses to assist them in the transition to full-

time nursing. Cedars-Sinai also allows its employees to participate in a mentorship program and in enrichment courses.

#### 4) Imperial County Office of Employment Training (ICOET)

**Partners:** Imperial County Office of Employment Training (ICOET) (fiscal agent), Imperial Valley College (IVC), and Imperial Valley Regional Occupational Program (ROP).

**Goals:** Provide preceptor positions at two local hospitals for 10 graduating LVNs and 15 graduating ADNs.

**Strategies:** This grant partners with a non-NWI \$343,756 WIA grant to IVC to provide tuition, academic, and other supportive services to LVN and ADN students. The focus of the ICOET grant is to work with the 25 recent graduates of the WIA grant to provide them with preceptors and other supports to ease their transition into the workforce.

#### 5) Kern County Employers' Training Resource

**Partners:** Kern County Employers' Training Resource (fiscal agent), Tulare County Workforce Investment Division, County of Inyo.

**Goals:** 55 licensed LVNs, ADNs, or Psychiatric Technicians (Psych Techs). The goals do not distinguish between programs.

**Strategies:** The Kern County grant addresses nursing school attrition and benefits from recently expanded access due to a new LVN program at Bakersfield Adult School. NWI provides tuition and support services to participants, who are recruited from health care workplaces, from lists of incoming and continuing nursing school students, and from CTI graduates who wish to continue their education. Kern and Tulare Counties have partnered with local health care providers by paying for 5 hours per week in release time for NWI participants if employers pay for 15 hours per week in a 20/20 program (generally includes 20 hours of school with 20 hours of work for full-time pay). Inyo County is supporting incumbent CNAs to complete LVN training. These CNAs work exclusively for nursing homes, which allow students to work part-time in lieu of providing paid release time.

#### 6) LA Works (Workforce Reform Pilot Project)

**Partners:** LA Works (fiscal agent), Children's Hospital of Los Angeles (CHLA), Children's Hospital Orange County, Children's Hospital San Diego, Loma Linda University Children's Hospital, Orange County WIB, San Bernardino County WIB, and South Bay WIB.

Goals: Provide Pediatric Residencies for 110 RNs (ADN or BSN) in four Children's Hospitals.

**Strategies:** This grant is specified a Workforce Reform Pilot Project. Children's Hospital LA is acting as grant lead, providing train-the-trainer programs, monitoring, and evaluation for the three other hospitals to adopt CHLA's nationally-recognized Pediatric Residency program for new-hire nurses. The program provides 860 hours of instruction over a six-month period. The four participating hospitals are collectively contributing \$6,849,280 in cash, release time, staff and facilities.

# 7) Madera Workforce Development Office (On-site Career Ladder Pilot Project)

**Partners:** Madera Workforce Development Office (fiscal agent), Fresno City College (FCC), Kaiser Permanente, St. Agnes Medical Center, Children's Hospital of Central California, Madera Community Hospital, and Community Medical Centers.

Goals: 65 ADNs.

**Strategies:** This grant combines nursing school capacity expansion and attrition reduction.

Approximately one half of the Madera NWI funds are paid directly to Fresno City College. These funds pay for tuition and other school expenses for incumbent workers at the five partner hospitals to bypass FCC's wait list and complete an LVN to ADN program or an accelerated ADN program that has expanded slots with the grant money. Participants are selected by their employers and must have completed all pre-requisites before being accepted to the program. Kaiser Permanente provides one paid release day per week, while the other health care partners only allow flexible scheduling. The Madera, Merced, and Kings County WIBs, as well as SEIU Local 250 (for Kaiser Permanente employees), provide case management and support services.

#### 8) North Bay Employment Connection (NBEC) (Focus Site)

**Partners:** North Bay Employment Connection (NBEC) (fiscal agent), Kaiser Permanente/Shirley Ware Education Center, Marin Employment Connection, Napa County Training and Employment Center (TEC), Solano WIB, and Sonoma County Human Services Department.

**Goals:** 227 licensed nurses or Psych Techs not distinguished by program.

**Strategies:** Each partner has independently designed a strategy, but collectively the partners' strategies focus on reducing attrition from nursing school due to financial or other barriers, with a few targeted efforts to increase capacity. NWI funds are being applied to increase nursing school capacity in Napa and a \$150,000 grant from the Hospital Council of Northern and Central California is allowing for a capacity increase in Sonoma County. The Kaiser Permanente/Shirley Ware Education Center partnership is selecting and supporting Kaiser Permanente employees through LVN, ADN, or BSN

education at a number of schools across the region, providing academic, as well as financial assistance and career counseling. Marin County is providing financial and other support services to nursing students at the ADN, BSN and MSN levels who are at risk of dropping out of their programs for financial reasons. Napa County is providing financial and academic assistance to incumbent workers at two acute care hospitals, one veterans' facility, and at one inpatient psychiatric facility, to help them complete ADN and psychiatric technician training. Napa County is also providing funds directly to Napa Valley College to pay for a teaching assistant, as well as for an NCLEX review course. The NCLEX review in part targets international graduates. Both Solano and Sonoma Counties are providing financial and other assistance to LVN, ADN (Solano ADN only), and BSN students in financial need.

#### 9) Northern California Employment Network (NCEN)

**Partners:** NCEN (fiscal agent), Alliance for Workforce Development, Butte County, Humboldt County, Mendocino County, North Central Counties Consortium, Shasta County PIC, Siskiyou County, Tehama County, and Trinity County.

Goals: 185 LVNs, 81 ADNs, and 15 BSNs.

Strategies: Each partner has independently designed a strategy, but collectively the partners' strategies focus on reducing attrition from nursing school due to financial or other barriers. A few partners are also providing funding to community colleges and adult schools to increase educational capacity, fund faculty, purchase equipment, and develop evening and weekend options for students. Nine partners representing fourteen rural northern California counties are using NWI funds to recruit incumbent health care workers, low-income community members, and current or entering nursing school students into LVN, ADN, and BSN programs, as well as to provide tuition, support services, and RN refresher courses. Individuals interested in nursing education face additional barriers in these rural counties of Northern California, where average income is low, public transportation is unavailable, and educational institutions, as well as clinical training opportunities, are scarce. Some of the partners have no nursing programs in their counties. Without the financial and support services offered by NWI, including in some cases transportation and lodging allowances, most of the participants would not be able to pursue a nursing career.

#### 10) NOVA Works

**Partners:** NOVA (North Valley) Works (fiscal agent), College of San Mateo, Monterey County, Santa Clara/San Benito Counties, and Santa Cruz County.

Goals: 75 ADNs.

**Strategies:** Each partner has independently designed a strategy, but collectively the partners' strategies focus on increasing the graduation rate of ADNs among six community colleges in the region. Efforts to increase the graduation rate include funding faculty positions that allow additional students to be accepted from wait lists, funding clinical assistants, providing intensified academic support for at-risk students, refilling ADN program slots vacated in the first semester with LVNs, and providing financial assistance and support services to enrolled students. In addition, NOVA has contracted with the Regional Health Occupations Resource Center (RHORC) at Mission College to provide an NCLEX review course to graduates of any program who have failed the exam in the past, as well as imminent and recent graduates preparing for their first attempt.

#### 11) Orange County Workforce Investment Board (WIB) (Focus Site)

Partners: Orange County WIB (fiscal agent only), Long Beach WIB, and Saddleback College.

**Goals:** 30 LVNs, 48 ADNs, 30 BSNs, 25 students prepared to enter LVN program, and 324 incumbent RNs receive specialty unit training.

Strategies: The partners in this grant worked together to develop a strategic approach with several key activities, each to be conducted by the partner with the greatest expertise in the area. Together, the program's strategies are to increase the capacity of nursing schools in the region, support at-risk students already enrolled in nursing programs, and increase incumbent RNs' skills and job satisfaction. In Orange County, the four participating community colleges fund faculty, facility and equipment expansion for nursing programs, as well as facilitate communication among those colleges. The partners are also providing scholarships, academic assistance, as well as other supportive services to students. In addition, one of those colleges, Saddleback, operates the Specialty Nurse Training Program for incumbent RNs. The Long Beach WIB coordinates activities for educators and health care providers in the area to recruit and provide academic and financial support to LVN, ADN, and BSN students in the region and to better prepare students for an LVN program. These activities are carried out through cooperative arrangements among Long Beach Memorial Hospital, Long Beach City College, and California State University at Long Beach.

## 12) Riverside County Economic Development Agency (On-site Career Ladder Pilot Project)

Partners: Riverside County Economic Development Agency (fiscal agent), California State University at Dominguez Hills, Chaffey College, College of the Desert, Desert Regional Medical Center, Riverside Community Hospital, Saint Mary's Hospital, and San Bernardino County WIB.

Goals: 50 LVNs (30 of these to be medical corpsmen and others who challenge the LVN exam), 45 BSN (all incumbent ADNs), and 30 incumbent health care workers will complete LVN prerequisites.

Strategies: Riverside County has worked with its educational partners to hire faculty who will teach LVN prerequisite courses, as well as LVN and BSN courses online and on-site at the participating hospitals. Students have online options for their theory courses and receive case management services from San Bernardino and Riverside Counties. Students participating in the ADN to BSN program who take courses on-site are anticipated to complete their programs in as little as 2.5 years. Some funding is also going towards a course for medical corpsmen and women to challenge the NCLEX. The three partner hospitals are collectively making \$879,596 in in-kind contributions for paid release time, tuition reimbursement, and classroom space. The program is also using NWI funds and seeking equipment donations to build a nursing skills lab on-site at the Economic Development Agency that will be used for LVN and possibly ADN courses.

#### 13) Sacramento Employment & Training Agency (SETA)

**Partners:** Sacramento Employment & Training Agency (SETA) (fiscal agent), Golden Sierra Job Training Agency, SEIU Local 250/Shirley Ware Education Center, and Yolo County Department of Employment and Social Services.

Goals: 157 RNs, 50 LVNs.

**Strategies:** Each partner has independently designed a strategy, but collectively the partners' strategies include increasing nursing education capacity and reducing attrition from nursing school due to financial or other barriers. SETA is funding faculty salaries to increase LVN and ADN slots at adult schools, community colleges, and California State University at Sacramento. SETA is also providing financial assistance and support services to enrolled LVN students in severe financial need. San Joaquin created an RN refresher course and is increasing slots at San Joaquin Delta College. Golden Sierra Job Training Agency and Yolo County are providing financial assistance and support to at-risk students, while SEIU/Shirley Ware Education Center is providing a range of academic and financial assistance to Kaiser Permanente employees pursuing nursing degrees.

# 14) Saddleback College Regional Health Occupations Resource Center (RHORC) (Workplace Reform Pilot Project)

**Partners:** Saddleback College Regional Health Occupations Resource Center (RHORC) working with the cooperation and support of 32 health care providers in the region.

Goals: Prepare 300 clinically skilled RNs to work as preceptors to novice nurses.

**Strategies:** In order to increase the quality and consistency of support provided by preceptors to newly hired nurses, Saddleback College RHORC faculty developed a 12-hour workshop program. They also developed a 16-hour "Train the Trainer" course. Participating health care providers paid release time for employees who attended the preceptor and "Train the Trainer" courses, contributing a total of \$128,160. Those who have completed the "Train the Trainer" course include hospital-based In-Service Educators, individuals who provide training to emergency services personnel in Orange County, and a staff member of the California Nurses Association who has received external funding to research preceptor training approaches.

#### 15) San Bernardino County Jobs & Employment Services Department

Partners: San Bernardino County Jobs & Employment Services Department (fiscal agent), California Nurses Educational Institute, College of the Desert, Loma Linda University, Mt. San Jacinto Community College, Riverside Community College, Riverside County Economic Development Agency, San Bernardino Employment Training Agency, San Bernardino Valley Community College, and Victor Valley Community College.

**Goals:** 101 ADNs, 12 re-entering or international nurses, 8 practicing nurses trained as preceptors, and 20 practicing nurses provided with specialty training.

ADN programs. Other activities of the grant include increasing the supply of re-entering and internationally trained nurses with refresher courses, specialty training, and preceptor training, as well as increasing the skills and satisfaction of practicing nurses. In contrast to most other California nursing programs, nursing programs in San Bernardino County do not have prepared prospective ADN students waiting for admission. After adding faculty to increase ADN slots, San Bernardino County and its partners used flyers on college campuses, in health care work sites, and in One-Stops to recruit prospective students. The One-Stop system, created by the Workforce Investment Act, aims to combine job training and education with employment resources under one accessible system. Participants undergo 1-1½ days of assessment, and then develop an educational plan. NWI funds do

not cover tuition costs, although some health care providers assist employees with tuition. In addition to paying faculty salaries to increase student enrollment and provide a skills lab for at-risk students, NWI pays for assessment fees, testing, license application fees, books, and supportive services.

#### 16) San Diego Workforce Partnership, Inc. (Focus Site)

Partners: San Diego Workforce Partnership, Inc. (fiscal agent), Comprehensive Training Systems, Brighton Health Alliance, Kaiser Permanente, Kennon Shea & Associates, and Sharp HealthCare Goals: 35 LVNs, 112 ADNs, and an additional 45 re-enter nursing or receive specialty training.

Strategies: The San Diego Workforce Partnership grant is focused on reducing nursing school attrition among incumbent health care workers. In this grant, each health care provider partner selects employees who have either been accepted into or are already enrolled in LVN or ADN programs to participate in the NWI program. NWI participants receive paid release time, the cost of which is shared by the NWI grant and the health care provider. Participants receive case management, support services and financial assistance, if eligible, from Comprehensive Training Systems. In addition, the health care provider partners (with the exception of Kaiser Permanente) offer on-site refresher courses for inactive nurses who wish to return to nursing and incumbent nurses who wish to upgrade their clinical skills with specialty unit training.

#### 17) San Francisco Private Industry Council (PIC)

**Partners:** San Francisco PIC (fiscal agent), California Pacific Medical Center, Chinese Hospital, City College of San Francisco (CCSF), Jewish Home for the Aged, Jewish Vocational Services (JVS), Kaiser Permanente, Kindred Health Care, Laguna Honda Hospital, Shirley Ware Education Center of SEIU Local 250, St. Francis Memorial Hospital, St. Mary's Medical Center, San Francisco General Hospital, and UCSF Medical Center.

**Goals:** 8 ADN, 12 CNAs complete LVN training, 26 returning LVNs or internationally trained RNs to complete LVN refresher course.

**Strategies:** This grant addresses both capacity and attrition. The San Francisco PIC is using NWI funds to double City College of San Francisco's (CCSF) capacity in its LVN refresher course geared primarily toward internationally-trained RNs. CCSF already offers this course once a year, drawing students from immigrants referred by Jewish Vocational Services (JVS) and the separately funded Welcome Back Program. JVS already provides case management and supportive services to many of these students. With NWI funding, the course can now be offered twice a year and JVS can receive reimbursement for supportive services provided. In addition to the LVN refresher course, the San

Francisco PIC has partnered with local health care providers to provide financial assistance and supportive services to incumbent CNAs pursuing LVN degrees, as well as incumbent LVNs and others pursuing ADN degrees. These employees must have already been accepted into a CCSF program in order to receive NWI support. All providers have committed to provide one day per week of paid release time to participants.

#### 18) Santa Barbara County Department of Social Services

**Partners:** Santa Barbara County Department of Social Services (fiscal agent), San Luis Obispo Private Industry Council, South Bay Regional Health Occupations Resource Center (RHORC)/Santa Barbara City College, and Ventura County.

**Goals:** 92 LVNs, 25 ADNs, 36 BSNs (ADN to BSN program), and 9 MSNs. In addition, 27 students begin ADN studies, 12 ADN students begin participation in work study programs, 48 students complete pre-requisite classes for an ADN program, and a preceptorship program begins in all four Cottage Health facilities.

**Strategies:** Each partner has independently designed a strategy, but collectively the partners' strategies focus on increasing nursing school capacity, reducing attrition from nursing school due to academic difficulties, and facilitating the transition from nursing school to the health care work place. NWI funds are being applied to LVN and ADN faculty salaries in community colleges and adult schools to increase training slots. Current and prospective students are also receiving academic support to complete prerequisite courses and improve academic performance, and current ADN students are receiving both clinical and financial assistance through a work-study program. A preceptor training program is being developed to support newly hired nurses within all four Cottage Health facilities.

#### 19) South Bay Workforce Investment Board

**Partners:** South Bay WIB (fiscal agent), City of Hope Hospital, Clear View Alzheimer's Care Facilities, Foothill WIB, Hub Cities WorkSource Center, Little Company of Mary Hospital, Robert F. Kennedy Memorial Hospital, St. Francis Medical Center, and St. Vincent Hospital.

Goals: 44 LVNs.

**Strategies:** The South Bay WIB is working with health care providers in the region to select and support incumbent CNAs and other incumbent health care workers, as well as recent CNA program graduates who have not yet secured employment through an LVN course of study. All provider partners are contributing paid days off for employees, as well as facility and staff time for clinical training. Some NWI participants require assistance with pre-requisite preparation and English

mastery, which is equally supported. South Bay WIB's Business and Career Centers, Foothill WIB, and Hub Cities WorkSource Center provide assessment, case management, and support services.

# 20) South East Los Angeles County (SELACO) Workforce Investment Board Partners: South East Los Angeles County (SELACO) WIB (fiscal agent), Alhambra Convalescent Home, Inc., Cerritos College, Hacienda La Puente Adult Education, Kaiser Permanente, Long Beach City College, Oakview Convalescent, Inc., and St. Francis Career College.

Goals: 96 LVNs, 48 ADNs, plus NCLEX review course for LVN and RN students.

Strategies: The SELACO WIB is working with educational and health care provider partners to increase capacity and decrease attrition in LVN and ADN programs, in part by funding faculty. Provider partners select incumbent CNAs and LVNs to participate and provide these participants with paid release time (Kaiser Permanente only) or flexible schedules. A few participants are not incumbent workers, but instead recent CNA graduates who need financial assistance and support services to complete LVN training. SELACO uses NWI funds to contract directly with participating schools and colleges for training slots, paying between \$6,000 and \$8,000 per student. SELACO and SEIU (for Kaiser Permanente) provide case management and support services to participants. St. Francis Career College and Cerritos College offer tutoring and NCLEX preparation to their students.

#### 21) Stanislaus County Department of Employment & Training (DET)

**Partners:** Stanislaus County Department of Employment and Training (DET) (fiscal agent), California Association of Healthcare Facilities (CAHF), and Emanuel Hospital of Turlock.

Goals: 36 LVNs, 2 ADNs, and 2 BSNs.

**Strategies:** The focus of this grant is to reduce nursing school attrition. The health care provider partners select incumbent CNAs, LVNs, and ADNs who have already been accepted to or are already enrolled in LVN, ADN, or BSN programs at Modesto Junior College or California State University at Stanislaus, and provide paid time off to these employees. In addition, Stanislaus County DET screens and selects some full-time nursing students to receive NWI support. All participants receive financial and academic assistance, case management, and the full array of Workforce Investment Act supportive services. Emanuel Hospital offers remedial academic assistance on-site to NWI participating employees.

#### 22) West Hills Community College District (Focus Site)

**Partners:** West Hills Community College District (fiscal agent), Fresno City College, Madera/Reedley College, Porterville College, Bakersfield College Delano Campus, California State University Fresno, Nurse Leadership Council, Clovis Adult School, Fresno Adult School, and Hanford Adult School.

Goals: 98 LVNs, 96 ADNs, 55 BSNs, and 32 BSNs and MSNs become nurse educators.

Strategies: The educators working together on this grant designed a broad strategy to increase nursing school capacity, streamline educational programs, and increase cooperation among educational institutions. Several of the educators have received approval for and begun new or expanded nursing programs, including face-to-face and distance education theory courses, fast track programs, and evening/weekend options. In addition, the Nurse Leadership Council is assisting with a program to help BSNs and MSNs become nurse educators. The West Hills program addresses nursing school attrition and NCLEX pass rates by providing increased preparation for pre-nursing students and NCLEX review courses, as well as funding faculty to work with remedial students. West Hills is also taking a leadership role in coordinating nursing education resources in the Central Valley, where a variety of efforts funded by health care providers and private foundations are attempting to address the severe nursing shortage in the region.

#### VI. Program Approaches

The 22 programs each use one or more approaches to address the supply of the nursing workforce. Ultimately, there are few mechanisms by which the number of nurses in the workforce can be increased. Those include increasing capacity in nursing programs, improving success of enrolled students, and facilitating licensure of international nursing graduates, inactive nurses, and military nursing personnel. The NWI programs use a variety of approaches related to those basic mechanisms, which include the following:

- Create new nursing programs (LVN and RN)
- Expand the number of slots in existing programs
- Reduce the dropout rate of students already enrolled in nursing programs (increasing the number of graduates)
- ➤ Increase NCLEX pass rates
- ➤ Improve retention of nurses working in nursing (decrease turnover)
- Encourage RNs not currently employed in nursing to re-enter the workforce
- Train international nursing graduates and military corpsmen to challenge NCLEX

Some of the 22 programs focus on one approach, while others use two or more. The intent of the NWI initiative was not to increase recruitment of nurses from other countries. Thus, that was not an approach used by partners under the auspices of this initiative, with the exception of the San Francisco PIC. However, a few sites offer LVN refresher courses that have attracted internationally trained RNs seeking to pass the LVN, and eventually RN, licensing exams in California. The direct recruitment of international nurses through special visa programs continues to be practiced by many hospitals and health systems.

Table 1 summarizes the approach used by each of the collaboratives to increase the supply of nurses.

Table 1. Intervention Approach by Program

Collaborative Name	Create new training slots (Create new educational program or expand slots in existing program)	Reduce attrition from existing educational program	Increase NCLEX pass rate	Decrease turnover among working licensed nurses	Increase [re-] entry among non-practicing nurses/internationally- trained nurses/military
East Bay Works		Scholarships & other support to LVN and ADN students, both incumbent workers and full-time students		Work-study experiences, additional classes & preceptors to graduating ADNs	
Fresno Workforce Investment Board	Kaiser Permanente has purchased additional ADN slots at Fresno City College	Scholarships & other support to LVN, ADN, & BSN students who are Kaiser Permanente incumbent workers			
Hollywood WorkSource/Cedars- Sinai Medical Center	Pay for additional ADN & LVN faculty allowing participants to bypass wait lists	Scholarships & other support to LVN and ADN students, both incumbent workers and full-time students	Sponsor a NCLEX review course for individuals who have failed once, and to new RN graduates	Cedars-Sinai employees participate in mentorship program & enrichment courses	
Imperial County Office of Employment Training				Preceptorship program for recent LVN & ADN grads	
Kern County Employers' Training Resource		Scholarships & other support to LVN, ADN & Psych Tech students, both incumbent workers and full-time students			
LA Works Workplace Reform Pilot				Provide Pediatric Residency for new hire RNs	
Madera Workforce Development Office On-site Career Ladder Pilot	Pay Fresno City College to expand ADN slots for incumbent workers	Scholarships & other support to ADN students who are incumbent workers			

Collaborative Name	Create new training slots (Create new educational program or expand slots in existing program)	Reduce attrition from existing educational program	Increase NCLEX pass rate	Decrease turnover among working licensed nurses	Increase [re-] entry among non-practicing nurses/internationally- trained nurses/military
North Bay Employment Connection (NBEC) Focus Site	Fund teaching assistant for LVN to ADN program at Napa Valley College	Scholarships & other support to LVN, ADN, BSN, MSN & Psych Tech students, both incumbent workers and full-time students	Fund NCLEX review course at Napa Valley College		Fund NCLEX review course at Napa Valley College (includes international graduates as target groups)
Northern California Employment Network (NCEN)	Fund faculty and equipment for community colleges and adult schools; developing evening and weekend options	Scholarships & other support to LVN, ADN & BSN students, who are incumbent workers, full-time students, and low-income community members			Offer RN refresher course
NOVA Works	Fund faculty and clinical assistants for community colleges	Scholarships, academic assistance, and support services to high-risk students; refill ADN slots vacated in first semester with LVNs	Provide NCLEX review course		
Orange County Workforce Investment Board Focus Site	Fund faculty, equipment and facilities at community colleges	Scholarships, academic assistance, and support services to high-risk students; provide preparation for LVN students		Provide specialty unit training for incumbent RNs	
Riverside County Economic Development Agency On-site Career Ladder Pilot	Fund faculty to provide LVN pre- req, LVN & BSN courses online & on-site at participating hospitals; constructing LVN/ADN skills lab	Provide support services to incumbent workers enrolled in on-site LVN and BSN programs	Fund LVN NCLEX challenge course for medical corpsmen and women		
Sacramento Employment and Training Agency (SETA)	Fund faculty at adult schools, community colleges, and CSUS to increase slots for LVN and ADN programs	Scholarships, academic assistance, and support services to high-risk students and incumbent Kaiser Permanente workers			Offer RN Refresher course

Collaborative Name	Create new training slots (Create new educational program or expand slots in existing program)	Reduce attrition from existing educational program	Increase NCLEX pass rate	Decrease turnover among working licensed nurses	Increase [re-] entry among non-practicing nurses/internationally- trained nurses/military
Saddleback College Regional Health Occupations Resource Center				Prepare 300 clinically skilled RNs to serve as preceptors to novice nurses;	
Workplace Reform Pilot				provide Train the Trainer courses for on-site use	
San Bernardino County Jobs & Employment Services Department	Fund faculty at five community colleges, for ADN programs	Provide financial assistance and support services to ADN students; fund skills lab faculty for at-risk students		Provide specialty nurse training and preceptor training	Offer RN Refresher course
San Diego Workforce Partnership, Inc. Focus Site		Provide paid release time to incumbent health care workers in LVN and ADN programs; financial assistance and other support services provided if needed		Provide specialty unit training to incumbent RNs	Provide on-site refresher courses for inactive RNs
San Francisco Private Industry Council		Provide financial assistance and support services to selected LVN & ADN students			Provide LVN refresher course to internationally-trained RNs and inactive LVNs
Santa Barbara County Department of Social Services	Fund faculty at four community colleges and one adult school for LVN and ADN programs	Provide academic support to prospective and current LVN, ADN, BSN and MSN students; provide work- study program for ADN students		Provide preceptor training	
South Bay Workforce Investment Board		Provide financial and academic assistance, support services, and paid days off to LVN students			
South East Los Angeles County (SELACO) Workforce Investment Board	Fund faculty at two community colleges, one vocational college, and one adult school for LVN and ADN programs	Provide financial and academic assistance, support services, and paid days off to LVN and ADN students	Provide NCLEX review courses		

Collaborative Name	Create new training slots (Create new educational program or expand slots in existing program)	Reduce attrition from existing educational program	Increase NCLEX pass rate	Decrease turnover among working licensed nurses	Increase [re-] entry among non-practicing nurses/internationally- trained nurses/military
Stanislaus County Department of Employment and Training		Provide financial and academic assistance, support services, and paid days off to LVN, ADN and BSN students			
West Hills Community College District Focus Site	Fund faculty, equipment and facilities at community colleges to add programs & cohorts; increase online and evening/weekend options; train BSNs and MSNs as nurse educators; develop streamlined RN program	Provide prep courses for pre- nursing students; Hire instructor to work with remedial students	Review NCLEX pass rates, then revise curriculum to improve		

#### VII. Preliminary Evaluation of Focus Sites

The following four projects were selected as focus sites. The first of several planned visits to each of these sites is summarized below. Each of the four sites offers a unique approach to increasing the supply of nurses in California, which makes it difficult to make direct comparisons between program goals, successes, and challenges. At the conclusion of each focus site visit we asked the programs to offer suggestions for improvements within their own program, as well as across the entire Nurse Workforce Initiative. The site-specific comments are included at the end of each section.

#### 1) North Bay Employment Connection (NBEC)

Site Visit Description and Data Sources

The information about this site was gathered from a series of site visits to each of the counties included in the partnership, Marin, Sonoma, Solano, and Napa. A total of 12 interviews were conducted with 23 individuals. Individuals interviewed included staff of the workforce investment boards, educators from BSN, ADN, and Psych Tech programs, small community hospitals and large hospital systems, hospital associations, and labor unions.

#### Program Description

The NBEC program is a collaboration of four counties: Marin, Sonoma, Solano, and Napa. The collaborative partners have worked together before, at least in part, on the Caregiver Training Initiative and are also involved together in other, non-NWI initiatives to address the health care workforce needs of their counties.

#### Major Partners

The North Bay Employment Connection is the fiscal agent and administrative lead for this initiative. Each of the county partners also has a county coordinator from the local workforce investment organization. Each county has a specific funding allocation and target completion goals. There are many partners involved including the following:

#### **Health Care Employers**:

➤ Kaiser Permanente, Kentfield Rehabilitation Hospital, Marin General Hospital, Napa State Hospital, Palm Drive Hospital, Queen of the Valley Hospital, St Helena Hospital, Veteran's Home of California, St Joseph's Health Care System, Sutter Health, and several home care and long-term care facilities.

#### **Education Programs**:

➤ Napa Valley College, College of Marin, Dominican University, Napa Adult School, Napa County Regional Occupation Program (ROP), Santa Rosa Junior College, Sonoma State University, Solano Community College.

#### Labor and Professional Organizations:

➤ Shirley Ware Education Center, California Nurses Association, California Association of Psychiatric Technicians, Service Employees International Union (SEIU) Local 250.

#### Other Involved Organizations:

The North Bay Section of the Hospital Council of Northern and Central California plays a major role in this initiative and in other regional efforts to address health care workforce shortages. The Council has raised funds from member-hospitals and has supported the coalition of hospitals in addressing North Bay health workforce issues.

#### Goals

The goal of this initiative is to have 227 completed licenses including registered nurses, psychiatric technicians, and LVNs. Specific targets by county are as follows: Sonoma 89, Marin 36, Solano 36, and Napa 41. The Shirley Ware Education Center has a goal of 25 individuals. The registered nurses will include graduates from ADN, BSN, and MSN programs. As of Fall 2003, enrollments were: 19 LVN, 201 ADN (including LVN to ADN), 31 Psych Techs, 10 BSN, and 3 MSN.

#### Strategies

Each county has its own independent strategy, but collectively the partners' strategies focus on reducing attrition from nursing school due to financial or other barriers, with a few targeted efforts to increase capacity. For example, NWI funds are being applied directly to increase nursing school capacity in Napa. In Sonoma County, a grant from the Hospital Council of Northern and Central California is allowing an increase in the number of slots in existing programs. In Solano County, students who are at risk of dropping out of nursing school are given financial and other supportive services. Marin County is providing financial and other support services to nursing students at the ADN, BSN and MSN levels who are at risk of dropping out of their programs for financial reasons. Napa County is providing financial and academic assistance to incumbent workers at two acute care

hospitals, one veterans' facility, and at one inpatient psychiatric facility, so they can complete ADN and psychiatric technician training. Napa also is providing funds directly to Napa Valley College for a teaching assistant salary and an NCLEX review course.

#### Project Budget

The collaborative received \$2.6 million from EDD. Additional funds were received from the Hospital Council, Kaiser Permanente, and other matched or leveraged funds totaling \$2,303,549.

#### Program Features

Each of the counties has an independent strategy and programs designed to best suit the needs of their county. However, there are frequent collaborative meetings and centralized grant coordination activities. The NBEC initiative encompasses the whole spectrum of nursing education including LVN, ADN, BSN, MSN, Psych Techs, and international nursing graduates. The initiative also includes a variety of approaches within and between counties. Those specific approaches include, but are not limited to, recruitment of incumbent workers for LVN or LVN-to-RN programs, work-study (20/20) programs for students and incumbent workers, NCLEX review and tutoring, and financial assistance to students.

#### Early Successes

The individuals interviewed at the sites in this collaborative cited evidence of the early success of NWI programs. Those successes were achieved in several program areas:

- The regional task force approach to workforce shortages has been successful. This region has been particularly successful in collaborative planning to meet the current and future health care workforce needs of the partners. Individual entities are able to put their competitive issues aside for purposes of workforce planning. In addition to NWI efforts, there are other efforts under way to increase the supply of nurses. Strong leadership is a critical factor in the success of collaborative efforts in this group of counties.
- ➤ Enrollment targets generally have been met or exceeded. Enrollment targets were easily met in each of the counties. In fact, many more eligible and interested enrollees were turned away either due to a lack of capacity of because they were not far enough along in completing prerequisite courses.

- Several methods have been implemented to increase capacity. Examples include the weekend program at one community college. Another program increased capacity by adding a teaching assistant to one of the prerequisite courses that had been a bottleneck, delaying students in fulfilling their prerequisite courses.
- ➤ Small group and individually tailored tutoring led to success in passing the NCLEX.

  One program found that NCLEX tutoring in a small group format was more successful than the often-used Kaplan review courses. Students take computerized practice exams, identify their individual areas of weakness, and receive tutoring focused on those areas.

#### Early Challenges

- ➤ Pressure for early enrollment left applicants who were not far enough in the pipeline without service. Applicants had to be turned away who expressed an interest in nursing, but had not yet completed prerequisite courses. Some of the NBEC programs targeted primarily students already accepted into nursing programs in order to meet their goals for completed licenses by the end of NWI funding.
- Applicants served may not have been the neediest individuals. Because initial enrollment in NWI was fairly rapid, it was often decided more on a first-come, first served basis although all those served met requirements for financial need.
- ➤ Tuition costs increased at community colleges and state universities during the beginning phase of NWI, which increased program costs. Therefore, budgets needed to be revised and overall support, per student, was cut in some cases.
- ➤ Budget cuts at Napa State Hospital resulted in the termination of the 20/20 program. This program allows participants to work part time, but be paid full time while attending school. Most students were able to get their benefits at a full-time level, but found their wages reduced.

#### Suggestions from Focus Site

Longer-term support is needed for students starting in nursing pre-requisite courses. A longer-term funding commitment is needed in order to allow students just entering nursing a chance to be supported throughout the entire 3-4 year education process.

- More support for career ladder approaches is needed. Recruiting from among incumbent workers will become more prevalent, but there are still bumps along the way as one tries to progress through a nursing career ladder.
- Ongoing support is needed in order to sustain programs. Sustained grant support, or support from other sources, is needed to maintain the NWI components put into place for the nursing programs. Increases in capacity will not be maintained without further funding.

#### 2) Orange County WIB

Site Visit Description and Data Sources

Information about this site was gathered from 15 interviews conducted with 16 individuals during November 2003. Two evaluation team members interviewed the Orange County and Long Beach WIB coordinators, nursing program directors, hospital educators and specialists, and representatives of the partners of the NWI program for this area.

#### Program Description

This project is a collaboration of the Orange County and Long Beach Workforce Investment Boards, with each functioning relatively independently of the other. The Orange County program is organized around the WIB and the Regional Health Occupations Resource Center (RHORC) based at Saddleback College. Four participating community colleges, Saddleback College, Cypress College, Santa Ana College, and Golden West College, all have added faculty and accepted additional students from their wait lists. This program also includes the provision of specialty training, specifically critical care and telemetry, which the RHORC director coordinates. Specifically, critical care and telemetry training were identified by partner hospitals as needed in the local area.

The Long Beach program directs most of its funding to Long Beach Memorial Medical Center. The medical center in turn subcontracts with Long Beach City College and California State University at Long Beach.

#### Major Partners

The Orange County Workforce Investment Board and the Long Beach Workforce Investment Board.

#### **Health Care** Employers:

➤ Long Beach Memorial Medical Center and 24 area hospitals participating in the Specialty Nurse Training Program.

#### **Educational Programs:**

Saddleback College, Santa Ana College, Golden West College, and California State University Long Beach.

#### Goals

This site aims to add 30 LVNs, 48 ADNs, 30 BSNs into the workforce, as well as provide specialty training for 324 RNs, provide 25 students with the prerequisites for LVN programs, and offer student nurse employment. As of June 2004, there were approximately 30 LVN program enrollees, 56 ADN program enrollees, 20 ADN to BSN program enrollees, 295 RNs in specialty training, and 29 students enrolled in LVN prerequisite courses.

#### Strategies

The partners in this grant worked together to develop a strategic approach with several key activities, each to be conducted by the partner with the greatest expertise in the area. Together, the program's strategies are to increase the capacity of nursing schools in the region, support at-risk students already enrolled in nursing programs, and increase incumbent RNs' skills and job satisfaction. In Orange County, the four participating community colleges fund faculty, facility and equipment expansion for nursing programs, and facilitate communication among those colleges. In addition, one of those colleges, Saddleback, operates the Specialty Nurse Training Program for incumbent RNs. The Long Beach WIB coordinates activities of educators and health care providers in the area to recruit and provides academic and financial support to LVN, ADN and BSN students in the region and to better prepare students for an LVN program. These activities are carried out through cooperative arrangements among Long Beach Memorial Hospital, Long Beach City College, and Cal State Long Beach.

#### Project Budget

This site received \$2.1 million. The project has received a number of in-kind contributions, which total \$4,623,257 in paid release time, staff time, and facility use.

#### Program Features

- Fund additional faculty to increase ADN program capacity.
- Provide financial assistance and support services to students who are completing prerequisite courses for the LVN program, as well as to the students in the LVN, ADN, and BSN programs. In Long Beach, NWI services include books, uniforms, tuition, licensing, and fingerprinting fees. In Orange County, two schools do not provide NWI-covered services for students, another school provides a half-time mentor, and another school pays students' NCLEX fees.
- Create and implement a Specialty Nurse Training Program for incumbent RNs in hospitals throughout the region.
- Provide student nurse employment opportunities.

#### Early Successes

- ➤ Within Orange County and Long Beach, coordination among the various partners functions well. Long Beach WIB and Long Beach Memorial Hospital, which had not worked together before, are now actively discussing future projects. The four colleges and hospitals working together in Orange County state that they benefit from sharing resources.
- > Enrollment goals have been met or exceeded.
- > Coordination and communication among the four participating college has increased.

#### Early Challenges

- > Some new educational partners are unfamiliar with WIB regulations and have problems completing the required WIB forms.
- ➤ Getting through the contracting and sub-contracting process in the various organizations is frustrating and time-consuming, since, for example, college and county boards require legal and political scrutiny before signing.
- > Students cannot get pre-requisites, and pre-requisite wait lists are as long as those for the nursing program.

> Students still must work, care for families, and study. Having enough time is one of the biggest challenges.

#### Suggestions from Focus Site

- ➤ More guidance to the WIB from the State regarding requirements.
- > Provide funds directly to the schools.
- ➤ Have RHORC manage the specialty programs.
- ➤ Continue funding so expansions of programs can be maintained.
- ➤ Increase faculty salaries and reduce workload.
- ➤ Use turnover rate (hospital) as an evaluation measure of program success.
- ➤ Have on-time completion and NCLEX first-time pass rates as an evaluation measure.

#### 3) San Diego Workforce Partnership, Inc.

#### Site Visit Description and Data Sources

Information about this site is from 18 interviews conducted with 23 individuals in person and by phone between January and June of 2004. Two evaluation team members interviewed program managers, directors, coordinators, recruiters, and other representatives of the major healthcare provider partners of the NWI program plus four other healthcare provider institutions, including UC San Diego and Scripps. We also interviewed administrators from Comprehensive Training Systems (CTS), educators from Grossmont Health Occupations Center and Southwestern College, and two students receiving NWI support. In addition to these interviews, the evaluation team attended a monthly NWI meeting attended by community members associated with the San Diego site.

#### Program Description

San Diego's NWI program is in some ways an extension of the Caregiver Training Initiative (CTI), since many of the key players are the same. One difference is that Comprehensive Training Systems has a smaller role in NWI than CTI. Rather than administering the entire NWI program, CTS is now in charge of participant-based services like intake, eligibility, training, placement, and follow up, and employs two NWI case managers. San Diego's NWI program administration is managed by

the WIB-based San Diego Workforce Partnership, Inc. With few exceptions, for example, Kaiser Permanente, the NWI partners were previously CTI partners.

#### Major Partners

The San Diego Workforce Partnership, Inc. has the fiscal and administrative lead at this site. While it has its own Board separate from the San Diego Workforce Investment Board, the Workforce Partnership has direct oversight of WIA and other funding sources.

#### **Health Care Industry Employers:**

➤ Brighton Health Alliance, Kaiser Permanente, Kennon Shea & Associates, and Sharp HealthCare.

#### <u>Labor and Professional Organizations</u>:

➤ San Diego Healthcare Association, San Diego-Imperial Counties Labor Council, and the Quality Health Care Foundation.

#### **Education Programs**:

This grant does not include educators as partners or active participants. NWI participants receive paid release time and tuition assistance to attend adult schools, community colleges, and San Diego State University, but the schools are not aware of which students are participating.

#### Other Involved Organizations:

➤ Comprehensive Training Systems (CTS), a privately-owned training and job placement agency that serves underemployed and unemployed populations in San Diego County.

#### Goals

The goal of the program is to add 147 licensed nurses to the San Diego workforce using both upgrade training for incumbent workers and recruitment/refresher courses for non-practicing LVNs and RNs. This goal includes 35 LVN enrollees and 112 ADN enrollees.

In addition to the 147 licensed nurses, there is also a goal to have 45 individuals re-enter nursing or receive specialty training. The program provides upgrade or specialty training to licensed nurses who need refresher courses before returning to practice, as well as to incumbent nurses who wish to acquire specialty training. As a result, the total number of nurses actually re-entering practice cannot be determined until the end of the program.

#### Strategies

The San Diego Workforce Partnership grant's strategy is to reduce nursing school attrition among incumbent health care workers. Each health care provider partner in this grant selects employees who either have been accepted into or already are enrolled in LVN or ADN programs to participate in the NWI program. NWI participants receive paid release time, the cost of which is shared by the NWI grant and the health care provider. Participants receive case management, support services and financial assistance, if eligible, from Comprehensive Training Systems. In addition, the health care provider partners (with the exception of Kaiser Permanente) offer on-site courses for inactive nurses who wish to return to nursing and incumbent nurses who wish to upgrade their clinical skills with specialty unit training.

#### Project Budget

This site received \$2.1 million from EDD. They expect additional grants or in-kind contributions from the four participating health care providers, but there was no estimate of the value to these as of yet.

#### Program Features

The following activities and components characterize the San Diego NWI program:

- ➤ Brighton Health Alliance, sponsoring an "earn while you learn," an on-the-job re-entry program for nurses.
- ➤ Kaiser Permanente, providing upgrade training for CNAs, patient care assistants (PCAs) to LVNs and RNs.
- Kennon Shea & Associates, also sponsoring "earn while you learn" programs for CNAs.
- ➤ Sharp HealthCare, providing employer-based upgrade training for CNAs to LVN and LVN to RN.
- Employers screen and select incumbent workers for upgrade training, and provide wage matching, clinical instructors and classroom space for program participants.
- Educational providers do not receive funding from NWI.
- NWI pays tuition for workers depending upon need and budget, but employers have agreed to pay each NWI employee participant for 40 hours of work weekly. Workers negotiate part-time shifts with employers, which may vary each week. Employers

submit monthly reports to NWI indicating hours worked and NWI makes up the pay difference up to a cap negotiated with each employer. All employer partners have agreed to make up the difference if NWI funds are exhausted and employees are still in school.

Each employer has designed individualized selection criteria and processes. Criteria may or may not include financial need and may or may not require employee to already be in/accepted to a nursing program.

#### Early Successes

#### **NWI-Funded Activities:**

- As of June 2004, a total of 188 students enrolled in or completed NWI training, with most in RN programs. A total of 30 participants are enrolled in or have completed LVN programs, 126 are in or have completed ADN programs, and 32 have been involved with RN specialty training. Recruiting was not a problem, as it is for some WIA programs, since the employers performed the recruiting.
- Many of the students in this program might not be able to complete their training without some kind of additional assistance. This perception is supported by findings from the Participant Baseline survey where about half of the San Diego students mentioned needing financial assistance, or needing income while in school.
- ➤ One student we interviewed indicated that the program made it easier to get through school, since it paid for tuition plus two days' pay for one day of work.

#### **Related Activities**:

There have been several non-NWI funded efforts to increase the nursing population and actively promote the nursing profession in San Diego County. Those include the following:

- ➤ The Healthcare Association of San Diego and Imperial Counties (HASD&IC) formed a Nursing Shortage Task Force to address local shortages.
- ➤ The NURSES NOW program, which is a partnership between San Diego State University (SDSU) and ten local hospitals and healthcare organizations, each paying SDSU for added faculty slots.

- ➤ The Healthcare Workforce Alliance of employers and educators supports health care workforce development.
- ➤ The State Chancellor's Office funded 40 extra nursing slots to four of the junior colleges.
- ➤ A Welcome Back program supports 35 internationally trained health care workers to be trained as nurses at Grossmont College.
- ➤ Kaiser Hospital is working with Southwestern College to fund 40 LVNs for RN training.
- ➤ Palomar Pomerado Hospital is working with California State University at San Marcos to create a new nursing program.

#### Early Challenges

- Most participants in the NWI program were either already in a nursing program or taking nursing pre-requisite classes. However, interviewees suggested that the NWI funds helped students in the programs, and hopefully will decrease attrition. At least two employers were not able to find enough incumbent workers to fill their available training program slots. One employer had 22 slots with over 40 applicants, but only four applicants passed the entrance exam. Language was a barrier, as was the application process that many found "confusing." In the end, that employer went directly to a nursing school program and recruited already-enrolled student nurses to participate in the NWI program.
- There were initial delays in the ability to deliver supportive services to students. That challenge was remedied by assigning a staff person who can help the students at each of six career centers at an assigned time, so students can plan to go during staffed hours.
- More than one interviewee mentioned that the WIA requirements were cumbersome with too much tracking required, difficult paperwork, and WIA audits. There were few problems overall with program implementation, due in large part to the fact that they had previously conducted the CTI program.

#### Suggestions from Focus Site

- ➤ Directly contract with specific schools, rather than give the money to the employers for their own employees.
- Offer students a variety of different types of assistance, such as childcare, time off work, and financial aid.
- ➤ Use a multi-pronged approach: Increase nursing school capacity, decrease attrition, and improve the work environment.
- ➤ Reward nurses for quality work, by using accountability and continuity systems, recognition programs, on-site education and resources, as well as mentors and preceptors.
- ➤ Increase capacity in nursing schools and in pre-requisite courses, by giving priority to nursing programs in the community colleges and increasing the number of pre-requisite classes.
- Address the educator shortage, by increasing salaries, and relaxing the "60% rule" (the current regulation states that faculty persons working more than 60% time for two semesters become full-time.)
- ➤ Use fast track approaches to move students through training and education programs more quickly.
- > Use more outreach to culturally diverse groups, and to high school students and parents.

#### 4) West Hills Community College District

Site Visit Description and Data Sources

Fifteen interviews were conducted with 28 individuals to obtain information about the West Hills Community College District project. Two members of the evaluation team interviewed program managers, Workforce Investment Board directors, officials of partner hospitals, and nursing program directors. This site covers a large region of the Central Valley of California, ranging from Kern to Madera Counties. The evaluation team conducted most of the interviews at the sites of the partners' activities.

#### Program Description

The West Hills Community College District NWI program builds upon the project the grantee conducted with support from the Caregiver Training Initiative. The primary goals of this program are to increase capacity and pipeline for nursing programs, develop articulation agreements between all educational partners, and develop collaboration of educational leaders regarding access to health occupations. Unlike the other NWI regional programs, the West Hills project is managed by West Hills Community College District rather than a WIB. West Hills Community College also received substantial funding from EDD to support its psychiatric technician program at its Coalinga campus, in part to prepare for the opening of Coalinga State Hospital by the Department of Mental Health in 2005.

#### Major Partners

West Hills Community College District has fiscal and administrative responsibility for the project. The District is working with numerous partners, each of which is employing different strategies to increase the supply of nurses. Education partners received most of the NWI funding for this site. The partners are:

#### **Education Programs**:

Fresno City College, Madera/Reedley College, Bakersfield College, California State University at Fresno (CSUF), Clovis Adult School, Fresno Adult School, and Hanford Adult School.

#### **Labor and Professional Organizations**:

Nurse Leadership Council.

#### Employers:

Sierra View District Hospital.

#### Other Involved Organizations:

Fresno County Workforce Investment Board, Tulare County Workforce Investment Board, Kings County Job Training Office (JTO), Madera County Workforce Investment Board, and the Hospital Council of Northern and Central California.

#### Goals

The overall goal of this program is to add 96 ADNs, 55 BSNs, and 98 LVNs to the workforce of the Central Valley. In addition, the program will also help 32 RNs with BSN and MSN degrees become nurse educators. The sum of enrollment goals by campus is higher than the final supply

growth goals because it is anticipated that some of the enrolled students will not complete their education or pass the board exam. This site is well on its way to meeting its goals.

#### Strategies

The educators working together on this grant designed a broad strategy to increase not only nursing school capacity, but also to streamline educational programs and increase cooperation among educational institutions. Several of the educators have received approval and begun new or expanded nursing programs, including both face-to-face and distance-learning theory courses, as well as fast track programs and evening/weekend options. The programs that have increased their capacity to admit and educate nurses include Madera Center, the Bakersfield College distance learning project, Fresno Adult School, Hanford Adult School, and Clovis Adult School. Fresno City College expects to increase the supply of nurses by focusing on reducing student attrition from its program. In addition, the Nurse Leadership Council is supporting a program to provide courses for BSNs and MSNs to become nurse educators with selection, sponsorship, and development of curriculum. West Hills is also taking a leadership role in coordinating nursing education resources in the Central Valley, where a variety of efforts funded by health care providers and private foundations are attempting to address the severe nursing shortage.

#### Project Budget

This site received \$1.4 million from EDD. They are receiving approximately \$40,000 in-kind support from the Fresno WIB, \$20,000 in-kind support from the Madera WIB, and \$180,000 from Sierra View District Hospital, resulting in a total of \$240,000.

#### Program Features

The following activities and components characterize the West Hills NWI program:

- Educational institutions are the primary recipients of NWI funds, and most are using the funds to expand the number of slots available to educate LVNs and RNs.
- ➤ Workforce Investment Boards are receiving little or no NWI funding. Two WIBs are providing in-kind support by offering their services and support to NWI participants.

  Two other WIBs are providing these services with a small amount of financial support.
- Several employers are contributing additional funds to nursing programs to further expand educational slots.

- ➤ The Nurse Leadership Council is providing support in the selection, sponsorship, and development of curriculum to educate RNs with BSN and MSN degrees to increase the supply of clinical faculty.
- Sierra View District Hospital provides support to Porterville College's distance learning partnership with Bakersfield College.
- ➤ Hospital Council of Northern and Central California is involved in efforts to expand opportunities for clinical education, articulation, and other projects, including giving financial support to distance education.
- NWI partners are actively building relationships with each other, focused on specific activities such as improving articulation agreements and creating a health careers opportunity center.

#### Early Successes

- Fresno City College hired a microbiology instructor and rehired a counselor, thus expanding capacity in nursing prerequisite courses. They also reviewed and revamped their curriculum to improve NCLEX pass rates.
- Madera/Reedley College, which began an LVN program with start-up funds from another source, is using NWI support to admit students to the program.
- ➤ California State University at Fresno (CSUF), admitted new students to their pilot streamlined BSN program. This is an 18-month program, and admissions were very competitive in the first year. Admissions increased to 72 per class, up from 55 per class. The additional 17 students were selected on the basis of their grade point average in nine prerequisite courses. CSUF also added a faculty certificate program to increase the number or RNs in teaching roles.
- ➤ Sierra View District Hospital, which supported Porterville College's distance learning partnership with Bakersfield College. The Bakersfield College-led distance learning program for RNs has been established and already is viewed as a model for distance learning statewide. This program offers video and computer delivery of course material at the Delano campus of Bakersfield College, Porterville College, and the West Hills College Lemoore campus. Each remote site can accommodate 10 students, and

approximately 20 students are now enrolled. The remote sites will accept transfer and LVN-to-RN students to reach a goal of 30 graduates per site at the end of NWI. All clinical education is conducted at hospitals near the educational sites. This ambitious program was launched with support from several funding providers, and was accompanied by the hiring of a RN career coordinator who provides tutoring and other support to students.

- ➤ Hanford, Fresno, and Clovis Adult Schools added additional entering classes of LVN students this year, as well as hired faculty, with NWI funds. At Hanford, this was achieved by hiring more nursing faculty. The additional faculty also has enabled an incumbent faculty member to spend more time providing remediation and tutoring to academically troubled students. Each of the adult schools plans to continue the new faculty NCLEX remediation.
- The Nurse Leadership Council has provided support in selection, sponsorship, and in the development of curriculum to programs at CSUF and Fresno City College to train RNs with BSN and MSN degrees to be clinical faculty. Fourteen RNs have completed the program, and eight are now teaching.
- This NWI program has developed stronger relationships among nurse educators in the Central Valley. This project covers a wide area of California and is of particular importance to rural Californians. All partners participate in quarterly meetings, and West Hills' staff visit all of the sites. The West Hills team says they contact partners at least once a month. The program also has created a dialogue between educational partners and nursing directors. The West Hills program directors are in communication with regional WIBs weekly, and a staff member from West Hills attends all WIB meetings.
- Due to the improved communication between Central Valley nurse educators this grant has made significant progress toward the goal of improving articulation between nursing programs. The nurse education programs are sharing their curricula, and are working on programs to allow adult school graduates to continue their education in community colleges. Moreover, some nursing programs are working with high school districts to improve preparation of students for nursing education. Finally, the groups of

educators involved in the West Hills site also are examining other health occupations, such as pharmacy technicians, laboratory technicians, occupational therapist assistants, and radiology technologists.

#### Early Challenges

- Many of the Central Valley nursing programs are facing a shortage of qualified faculty. Hanford Adult School reports that their faculty leaves approximately every two years, with most returning to nursing practice. Many nurses have had no training in education, and BSN and ADN programs aggressively recruit the best teachers. Thus, it is difficult to recruit and retain good teachers for an at-risk adult school population.
- The basic educational preparation of students in rural areas tends to be poor. There are few opportunities for remediation; the WIBs do not offer remediation and community colleges and adult schools have limited resources.
- Coordination with the WIBs has been difficult at times. Each county interprets the Workforce Investment Act differently, and thus each nursing program must develop different strategies to work with the WIB. Some WIBs have rules forbidding "reverse referral," which means that the WIB can refer individuals to nursing programs, but the nursing programs cannot refer students to the WIB. These rules inhibit coordination efforts to provide financial aid and academic remediation to students. In one county, the nursing program admits and screens students on an academic calendar, which does not coincide with the WIB's screening calendar. Thus, it is difficult for new students at that nursing program to qualify for support from the WIB. Moreover, the performance goals of the WIBs do not allow for longer-term educational investments, such as those needed for licensed nurses. Thus, the WIBs prefer to support students at the entry level or in career ladders.
- > Transportation is a problem for many nursing students, due to the large distances between schools and clinical education sites.
- Many nursing students do not qualify for WIA support because their earnings are too high. Some receive services through the Job Training Office (JTO), which works in collaboration with the Employment Development Department (EDD), educational and training providers, as well as local business to ensure a trained local workforce.

#### Suggestions from Focus Site

- Allow more time to plan programs before the grant application is due. The existence of CTI before NWI helped establish partnerships that have been essential to the West Hills grant, but the program nonetheless has had to dedicate substantial effort to developing relationships.
- ➤ Extend NWI for a longer period of time. Nursing education is time-consuming, and it is difficult to meet even modest goals in a 3-year period. Ideally, NWI would enable schools to create new programs, such as the Bakersfield College distance learning program, and support them until they are self-sustaining, which typically requires four to five years.
- Community college budgets must be adequate to ensure the continuation of nursing programs. Nursing education is expensive due to requirements for low student-to-faculty ratios in clinical education. Colleges need to receive more funding per nursing student slot to ensure they have adequate funds to operate their nursing programs.
- ➤ Board of Registered Nursing and Board of Vocational Nursing and Psychiatric Technicians requirements for clinical education sites may be too restrictive. It is difficult to secure adequate space for clinical education.
- ➤ EDD should strongly encourage programs to cross regional boundaries. Because WIBs have different rules, relatively few NWI projects successfully cross county boundaries.
- ➤ Efforts to increase the supply of nurses need to consider the continuum of nurses, from LVN to MSN. Many efforts have focused solely on the associate degree, ignoring the facts that LVNs are highly demanded by many employers and MSN nurses are needed to fill faculty positions. Career ladder programs should be supported.
- A statewide effort is needed to address the shortage of nursing faculty. Financial support and program expansions are needed to encourage nurses to obtain master's degrees.
- Nursing programs should be allowed more flexibility in hiring faculty. Many nurses are interested in teaching part-time, but nursing programs are limited in their ability to rely upon part-time faculty. Temporary or permanent relief from these rules would help

- address the faculty shortage. Moreover, colleges are not able to offer competitive salaries for faculty; rules prohibiting salary increases for nursing faculty need to be relaxed.
- ➤ Education programs need reciprocity with trained nurse educators, so that nurses are allowed to teach in adult schools without additional training. A separate adult education curriculum should be created for nursing faculty, who now must be trained in a curriculum that applies to all adult school educators. Thus, nurses who are prepared to be educators in ADN programs are not qualified under current rules to teach in adult schools.
- Emphasis should be placed on efforts to increase the number of slots available for nursing students, and to increase course offerings for nursing prerequisites.
- More scholarships should be available to students so they do not have to work while they are in school. This financial support should extend to graduate studies to prepare more nursing faculty. More employers could provide scholarships.
- Remediation programs for under-prepared students need to be improved. Candidates and students need to have more personal and academic assessments performed to identify students who are likely to face difficulty in the nursing program and provide them with support. Funding and programs for remediation must come from the Community College Chancellors Office and the Workforce Investment Boards.

#### VIII. Preliminary Participant Baseline Survey

This section of the report describes NWI participant characteristics based on data collected at program intake from the Participant Baseline Survey. Participants at each site were asked to complete these forms at the time of initial enrollment into the NWI program. Descriptive data are based on 2,453 NWI participants for whom there were completed Participant Baseline Survey forms as of January 31, 2004. All sites except one have provided baseline survey data to the evaluation.

Appendix B contains a copy of the Participant Baseline Survey, as well as more detailed tables presenting findings from the survey, by site, and by type of training program. Percentages in these tables represent the number of respondents in each category, divided by the total number of respondents at that particular site, or in that particular training program.

Table 3 displays program participant characteristics, based on the type of training program. When these data were summarized, the evaluation team had not yet received Baseline data from two sites, Fresno and Northern California Employment Network (NCEN); thus, these two programs are excluded from this discussion. (Fresno later submitted 26 Baseline forms in February and March).

#### Participant Demographics

Table 3 includes participant demographics and work backgrounds, by type of training program. (Tables D8 and D9 in Appendix D shows these same characteristics by site). Participant mean age is around 34 years and almost half are married. Not surprisingly, the oldest students are in the preceptor training programs for experienced RNs, and the youngest, in the psychiatric technician (Psych Tech) and BSN RN programs. Almost three-quarters of those in the RN-to-BSN program are married. With the exception of the BSN students, most of the nurse trainees have children.

#### Participant Work Histories

Questions are included about work intentions during training and about participant work history, in order to understand the participant's level of exposure to health care giving. Data in Table 3 indicate that 85% of the respondents intend to work during their educational program. While most respondents in each type of program intend to work, the proportion is lowest for Psychiatric Technician trainees, which may reflect the intensity of the program. The proportion of those who worked in the past week ranged from just under half for Psych Tech trainees, to almost all of the preceptors. Any previous experience in health care (or within the last 12 months) was least common among the Psych Techs and most prevalent for the LVN to RN trainees

Table 2. Profile of NWI Program Participants by Type of Training

	Number of NWI Participants	Mean Age	% Married	% w/Child	% Intend to Work	Mean Weeks Worked*	% Worked in Past Week	Health Care Job— Ever	Health Care Job— Recent*
All Participants	2,453	33.6	44.8%	53.3%	85.0%	37.0	75.5%	68.4%	50.8%
ADN RN	592	32.7	40.6%	46.4%	84.8%	38.2	74.0%	68.3%	55.0%
BSN RN	171	31.0	39.3%	33.9%	94.2%	36.4	81.8%	64.5%	46.7%
RN-to-BSN	104	36.7	72.0%	59.2%	84.5%	39.3	75.7%	75.5%	47.1%
LVN	466	32.5	38.8%	62.0%	73.6%	32.4	61.9%	77.2%	60.4%
LVN-to-RN	180	37.1	52.2%	68.5%	95.1%	42.4	86.5%	85.2%	77.8%
Preceptor	256	40.9	58.4%	64.7%	97.4%	49.3	99.4%	55.1%	27.1%
Psych Tech	146	30.6	33.1%	52.4%	60.2%	26.9	47.9%	36.1%	24.3%
Specialty	286	32.2	44.6%	41.0%	97.4%	37.0	95.0%	71.1%	43.6%

<sup>\*</sup>In past 12 months.

Note: Reported means and percentages are based on NWI baseline surveys with valid responses for the relevant questions.

#### How Participants Heard about the Program

We asked each participant how she/he first heard about the NWI training program, and provided a list of response categories. Overall, the most common responses were: at work (32%), at school (20%), and from someone else (19%) (Appendix D, Table D3). Marketing techniques such as newspapers, newsletters/mailings, TV/radio, brochures, job fairs, and websites attracted another 15% of participants.

Based on responses to the item on how participants were recruited, by type of training, we found that most of the RNs learned about the program at work (e.g., preceptors, RN to BSN, specialty nurse training) (Appendix D, Table D7). About one in three LVN trainees learned about the program at school. Many from each group learned about it from someone else, such as 46% of those in the Psych Tech group.

We also examined responses by collaborative site (Appendix D, Table D10). Over half of the LA Works, Orange County, Riverside, and San Diego respondents learned about the NWI program at work. This is not surprising since these programs are training incumbent workers. At the North Bay and the South East LA sites, over 40% of respondents mentioned school as their source of information. Newspaper ads (23%) and brochures (10%) worked well for the West Hills (Psych Tech) program. LA

<sup>\*\*</sup> Excluded categories are pre-RN (63), Other (105) and Unknown (84).

Works had the most successful job fair results (10%) compared with many of the sites where no one selected job fair.

#### Comparison of Participant Supportive Services with Perceived Needs

We asked participants two questions about assistance. The findings are displayed in Table 4.

- 1) Have you been offered any assistance with childcare, transportation, tutoring, books and supplies, tuition, or any other needs during your training program? and
- 2) Do you need any (or more) assistance with childcare, transportation, tutoring, books and supplies, tuition, or any other needs during your training program?

Tuition reimbursement was the most common form of assistance offered, to 35% of the total participants. This was followed closely by assistance with books and supplies such as uniforms, which were offered to almost a third (29%) of the NWI participants. The last two columns of this table are based on six separate cross tabulations (offered assistance with services by need any assistance), and show for each category how many participants needed assistance but did not receive it. Offered services seem to correspond to the level of need, even though a number of students felt they had needs for which they were not offered assistance. Most unmet needs were for books and supplies, and for tuition. Transportation was an unmet need for about 10% of the participants. Very few students stated that they needed paid time off, although that was not a separate category on the questionnaire; rather, it was an open-ended response written in the "other" category.

Table 3. Supportive services offered and services needed during training.

Number of students who				
	were offered assistance with	%	needed but were NOT offered assistance with	%
Tuition	873	35.6%	436	17.8%
Books and supplies	702	28.6%	617	25.2%
Childcare	115	4.7%	208	8.5%
Transportation	124	5.1%	254	10.4%
Tutoring	188	7.7%	199	8.1%
Paid time off	23	0.9%	18	0.7%

We also examined type of assistance offered during the training program by type of training program (for details, see Appendix D, Table D7) by the program site (For details, see Appendix D, Table D10).

#### Summary of Additional Findings

These general findings represent participant baseline data collected to date and are not intended to be interpreted as anything other than preliminary findings. It should be stressed that it is challenging to compare students across sites, or across programs, because the programs differ from each other in design, target population, and type of training. For example, the Saddleback and LA Works sites focus on workplace reform by establishing nurse preceptor positions. These sites and programs thus have working nurses enrolled, and the Saddleback group is significantly older, on average. The West Hills Psychiatric Technician program focuses on training Psych Techs, and has recruited more non-healthcare workers than other sites; its trainees also are less likely to have worked at all in the past week or year. However, some interesting trends can be seen in these data collected to date.

General preliminary findings, overall (Appendix D, Tables D1 – D3):

- ➤ While 42% of the participants are married, about 11% are divorced, and 36% have never been married.
- About 19% are under 25 years of age, and 15% are over 45.
- ➤ Most (87%) own a car.
- ➤ About 41% worked over 30 hours in the past week; the remainder worked part time.
- ➤ Of those with previous health care jobs, most worked as nursing aides (37%) or clerks (15%).
- About 29% of participants had no prior healthcare training.

General preliminary findings, by site (Appendix D, Tables D4-D10):

- The youngest participants are from the LA Works site; the oldest from Saddleback (preceptor training).
- The LA Works participants are less likely to have a child, but over 2/3 of those at SELACO have children, which could be due to the CTI graduates/Welfare-to-Work parents who were targeted at SELACO.
- ➤ While three-quarters or more at most sites plan to work during training, fewer than half of those at West Hills (Psych Tech) plan to work, probably due to high program intensity at West Hills.

➤ The largest proportions with prior health care work experience are at San Diego; the smallest (29%) proportions are from the West Hills Psych Tech program.

General preliminary findings, by type of training:

- ➤ Those in LVN-to-RN, Preceptor, RN-to-BSN, and Specialty programs all worked 30 hours or more the previous week.
- More LVN trainees than any other group (56%) had previously worked in health care.

In the interim and final process reports we will continue to analyze baseline data for trends, similarities, and differences among programs, within the context of their diverse targets and goals.

#### IX. Preliminary Early Departure Survey

To date, we have received contact information on fifty-five individuals who have dropped out of NWI-funded programs. The sites that have reported early departures include Riverside/San Bernardino Counties, Kern County, North Bay Employment Connection, East Bay Works, Orange County, Madera County, the Sacramento Employment Training Agency, and Santa Barbara County. It is likely that participants have dropped out of nursing programs at each of the sites, yet not all of the early departures have been reported. Members of the evaluation team are in the process of contacting individuals who have dropped out and have conducted two interviews. Based on the team's experience in the Caregiver Training Initiative, we likely will have to make several attempts to contact each person, and many of the interviews will take place during the evening hours.

#### X. Summary of Preliminary Findings

At this point in the evaluation process, we primarily have descriptive data and few preliminary findings. We have visited each focus site once and conducted one or two telephone interviews with all 22 sites. However, some themes seemed to recur in those data collection efforts to date.

## 1. Collaboratives who had existing partnerships between industry, educators, and the WIBs had a smoother and speedier start up of their NWI activities.

The collaboratives who had previous existing relationships either from prior work on the Caregiver Training Initiative or another health care workforce project had an easier start up of their NWI project. Partnerships were already formed or were more easily formed with added partners, and the groups were familiar with working together on workforce issues. There seemed to be less concern about competitive issues and more sharing of information and resources.

# 2. Many of the collaboratives enrolled students already in the nursing education pipeline and focused on improving graduation and NCLEX pass rates as key features in their programs.

There was a widespread practice among the 22 programs of signing up students already in the process of obtaining an LVN or RN education. This was driven by the need for a quick start up and enrollment process as well as by the belief that program graduation was the outcome measure of interest to the State. (Graduating a new RN is about a 3-4 year process and the terms of the grant were one to three years). This led to a number of different program approaches for increasing retention rates, including academic support, tutoring, and financial and other support services in order to assure student success. Programs also focused on tutoring and preparation for the NCLEX with the goal of improving pass rates.

#### 3. Not all partnerships were perceived to be equally effective.

There was a variety of opinion and perception among the key staff interviewed about the effectiveness of the collaborative partnerships. Some partners expressed concerns about how funds were being allocated among the partners. Some shared with us their belief that a more effective way to increase nursing school slots would be to allocate more funds directly to educational partners. Others felt that the level of support for students was insufficient. These concerns were raised by several collaboratives, equally among those used to working together in the past and those new to the process.

## 4. Most collaborative programs are concerned about the sustainability of their efforts after the current NWI funding has ended.

The collaboratives that increased capacity in educational programs are concerned about the sustainability of activities put into place with the NWI funding. Educational programs that increased capacity by adding additional whole classes of students or increased slots in existing classes are concerned that they may need to cut back to previous enrollment levels unless new sources of funding are found. Programs that added academic support, review courses, and other support services are also concerned that they will not be able to sustain those efforts after current NWI funding ceases. Some of the collaboratives have been successful at raising other grant money or funds from industry, but not in sufficient quantities to continue all NWI activities. Many collaboratives have new ideas for ways to address the nursing shortage, but feel that additional resources will be required over the long-term.

#### 5. Increased focus is needed on other factors that impact the supply of nurses.

Many of the individuals interviewed expressed the need for the NWI to focus on other factors that impact the supply of nurses in California. Those include the need for additional nursing faculty, competitive faculty salaries, additional clinical placement sites, increased wages, and improvements in the work environment. They stressed that the nursing shortage is a multidimensional problem that requires a sustained multidimensional approach for its solution.

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### **APPENDICES**

Appendix A: Sample Site Interview Guide

Appendix B: Participant Baseline Survey Instrument

Appendix C: Early Departure Survey Instrument

Appendix D: Detailed Findings from the Participant Baseline Survey

Appendix E: Acronym Glossary

#### APPENDIX A

## **NWI Project Coordinator Sample Telephone Interview Guide**Summer 2003

Gı	rant amount:
Pe	erson reporting: Phone:
Pr	oject actual/anticipated start date-end date:
Pr	roject Budget
	<ol> <li>Amount from EDD:</li> <li>Additional grants or in-kind contributions?</li> </ol>
G	<u>pals</u>
Fo	or example:
•	Recruit, enroll, and support XX individuals for LVN, ADN, or BSN training RN Refresher course LVN and RN training opportunities Upgrade training for incumbent workers Expand and coordinate opportunities for middle and high school students to explore health care careers
<u>Ta</u>	arget Populations
Fo	or example:
•	Incumbent workers WIA-eligible unemployed adults Non-practicing RNs
St	rategies/Approaches
•	Describe how individuals will be selected for programs  Describe how enrollment will be secured in areas with impacted nursing programs, e.g., faculty being added for specifically selected incumbent workers or new WIA participants

#### **Educational Partners**

Organization	Level	Type of Training /Role		

#### **Case Management Partners**

Organization	Type of Support		

#### **Enrollment goals by partner:**

#### **Provider Partners**

Organization	Role		

#### **Union/Professional Organization Partners**

Organization	Role		

#### **Additional Questions**

- In addition to the real and in-kind support of your partners described above, do you have any other sources of support for this effort? What are the sources and the amounts of that support?
- Is there something I haven't asked about this project that you think is important?

#### **Reminders**

- 1. Complete baseline surveys.
- 2. Communicate early departures.

#### APPENDIX B

### **Nurse Workforce Initiative Evaluation**

## **Participant Baseline Survey**

Date:// Site: Interviewer Name:
1. Client Name:  Last First MI
2. Date of Birth:/
3. Social Security Number:
Your responses will be used to help us evaluate this training program and will be entirely confidential. You can refuse to answer any of these questions. Completing this form will take about 10 minutes.
1. In which training/education program are you currently enrolled or about to become enrolled?
☐ Certified Nurse Assistant (CNA) ☐ LVN
Required courses prior to entry into LVN
Required courses prior to RN  Associate Degree in Nursing (ADN)
☐RN to BSN ☐Bachelor Degree in Nursing (BSN)
□Other
2. What is the <u>complete name and location</u> of the school you are attending or will be attending?
Name of school:
Location of school (city):
3. What is your marital status? Are you,
☐Married and living with your husband or wife ☐Widowed
☐ Separated or living apart from your husband or wife ☐ Never married
□ Divorced □ Refused/don't know
4. Do you have children living with you in your home?
☐ Yes ☐ No ☐ Refused/don't know
□→ IF YES, How many under age 5? age 5 through 17?

5. How many hours, if any, did you a	ctually work <u>last week</u> at all pai	id jobs?
☐ 0 hours ☐ 1-10 hours ☐ 11-20 hours	☐ 21-30 hours ☐ 31-40 hours ☐ more than 40 hours	☐ Don't know
6. During the <u>past 12 months</u> how m vacation and sick leave: <b>Number of</b>	•	y including paid
Note: If respondent not sure, ple Note: 12 months=52 weeks (9	v 11	mber.
7. Have you ever worked (for pay) in 18? Do not count those that are part of		
Note: "Current program" refers to a Nurse Workforce Initiative  Nursing assistant/Nurse aide	the health care training/educati	ion program that is part of the
Licensed Vocational Nurse (LVN)		
Health Care Technologist/Technic		
Clerk/Administration in health care		
Food Service/Housekeeping in hea		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Other	g	
Refused/don't know		
Have never worked in a health care	e ioh	
Trave never worked in a nearm care	C 100	
8. Was this work (in the position abo	ove) within the past 12 months?	
□Yes □No □Have	e not worked in health care	Refused/Don't know
9. Before this program, have you have	d any specialized training/educa	ation in the health care field?
☐Yes ☐No  L→(If Yes) Please check all the fe	Refused/don't know ollowing training programs that	you have completed.
Certified Nursing A	Assistant (CNA)	r
<u> </u>	r health care profession	
Certified Home He		
Licensed Vocation	al Nurse (LVN)	

10.	Do you own a car?		
	Yes	□ No	☐ Refused/don't know
11.	How did you first hear a	bout the NWI traini	ng program? (check all that apply)
	Newspaper ads Public bulletin boards Newsletter or direct m Someone else told me TV, radio Brochures or other ma	ailing	☐ Job Fair ☐ Web-site ☐ At work ☐ Career center ☐ Health care worker union ☐Other(describe)
(Do		k that is part of you	e, for pay, while attending this training program? r training program. This information will not be shared
	☐ Yes, plan to work ☐ No	<u> </u>	Yes, plan to work <u>part-time</u> Don't know
13. ]	Have you been offered a	ny assistance with a	any of the following during your training program?
	☐ Childcare ☐ Transportation ☐ Tutoring		Books and Supplies Tuition assistance Other
14.	Do you need any (or mo	ore) assistance with	any of the following during your training program?
	☐ Childcare ☐ Transportation ☐ Tutoring		Books and Supplies Tuition assistance Other
15.	What made you decide	to take part in the tr	aining program?

#### **APPENDIX C**

## Nurse Workforce Initiative Evaluation Early Departure Survey

This is an anonymprogram early. Int				ıt did not	attend, or left the
Today's Date:/_	_/ Locatio	on/Site of Interview	wee		
Name of Interviewer_					
"Hello. I am in the Nurse Workford are hoping to learn m can change the progra	ce Initiative [or loc ore about the reas	cal name] by ons people leave t	ut then did not	complete	the program. We
	ponses will be <u>enti</u> your answers will l Your participation willing to answer o	irely confidential of the NO WAY affect is very important to our questions? The and I will go on to worked for pay in a	and your name any governme to this study, a lank you. If the the next quest	will not a ental serve end would re are an ion."	be on the ices you may be be much y questions you do
(CIRCLE IIII			ACITEINE.)		Refused/
			Yes	No	Don't know
Hospital					
Nursing home					
Residential care/ass	sisted living facility	ý			
Home health care					
Other (specify)					
started classes	, after one semeste	r, etc.)			Prompts: before you  ur decision to leave
_	(EXPLAIN SCAL	-	•	•	
SCALE:	Don't Know Or Refused	Not Applicable Not Important			Very Important
Found a job/decided t	o work	1 2	3		 4 5

SCALE:	Don't Know Or Refused	Not Applicable/ Not Important	Somewhat Important	Very Important
School too expensive/too hard to live without income	0 1	2	3	4 5
Cost or availability of child care	0 1	2	3	4 5
Personal or family problems	0 1	2	3	4 5
Were injured or became ill	0 1	2	3	4 5
Became pregnant	0 1	2	3	4 5
Cost or availability of transportation	0 1	2	3	4 5
Did not like patient-care work	0 1	2	3	4 5
Found the classes too hard	0 1	2	3	4 5
Failed exams	0 1	2	3	4 5
Program was too stressful	0 1	2	3	4 5
Didn't have time for homework	0 1	2	3	4 5
Did not like the instructors	0 1	2	3	4 5
Did not feel comfortable in the college or with the other students	0 1	2	3	1 5
Other (Specify)	0 1	2	3	1 5

4.	If this t	training progi	ram were offere	ed again, at a lai	ter date, would you enroll then?	
		☐ Yes	☐ No	☐ Maybe	☐ Refused	
5.	Is there	e anything the	e program coul	d have done to l	nelp you stay in the program?	
		☐ Yes	☐ No	☐ Maybe	☐ Refused	
⇒5b:	(IF "Yes		· ·	_	gram could have done?	
			-the-job trainin	_		
		_	e in the classro			
			ancial assistant			
			p with child ca		blems at home?	
			p with transpor		orems at nome:	
		_	oring help with			
		Classes a	and/or training	closer to your h	ome?	
		☐ More into	eresting classes	s?		
			epared instruct	ors?		
		_	t scheduling?			
		_	_	or shorter classe	es?	
			xibility about a	iosences?		
6.	Would	you recomm	end this progra	m to a friend?		
		☐ Yes	☐ No	☐ Maybe	☐ Refused	
7.	In the 1	next six mont	hs, do you plar	n to have a job a	s a health care or home care wo	rker?
		☐ Yes	□ No	☐ Maybe	☐ Refused	
8.	How o	ld are you?				
9.						
	And yo	ou are	1. Femal	e	2. Male	
10					☐ 2. Male completed (check one)?	
10		s the <u>highest</u>		l that you have		
10		s the <u>highest</u>	grade of schoo high school or	l that you have	completed (check one)?	
10		the <u>highest</u> 1. Some  2. High s  3. Genera	grade of schoo high school or school diploma al Educational	l that you have of less (completed gra Development d	completed (check one)? de 12)	
10		□ 1. Some □ 2. High s □ 3. Genera □ 4. Techn	grade of schoo high school or school diploma al Educational ical or certifica	l that you have of less (completed gra Development d	completed (check one)? de 12)	
10		1. Some 2. High s 3. Genera 4. Techn 5. Some	grade of schoo high school or school diploma al Educational ical or certifica	l that you have of less (completed grad Development distribution program	completed (check one)? de 12)	

☐ 6. Associate Degree from college
7. Bachelor's Degree from college
11. Is there anything else you would like to tell me about this program?

## APPENDIX D

Detailed Findings from the Participant Baseline Survey (As of January 2004)

Tables D1 to D10

D1

Demographic Characteristics of Participants

	# of Participants	% of Participants
Age		
Less Than 25	460	18.8%
25 to 30	466	19.0%
30 to 35	443	18.1%
35 to 40	306	12.5%
40 to 45	239	9.7%
Over 45	376	15.3%
NA	163	6.6%
Mean Age	33.6	
Marital Status		
Married	1,037	42.3%
Separated	113	4.6%
Divorced	265	10.8%
Widowed	16	0.7%
Never Married	882	36.0%
NA	140	5.7%
Have Child		
Yes	1,249	50.9%
No	1,095	44.6%
NA	109	4.4%
Own Car		
Yes	2,124	86.6%
No	198	8.1%
NA	131	5.3%
Intend to Work During Program		
Yes, Full-Time	823	33.6%
Yes, Part-Time	979	39.9%
No	318	13.0%
NA	333	13.6%

D2
Work Profile of Participants

	# of Participants	% of Participants
Weeks Worked in Past 12 Months		
None	270	11.0%
Less Than 26	312	12.7%
At least 26	1,871	76.3%
Mean Weeks Worked	37.0	
Hours Worked in Past Week		
None	571	23.3%
1 to 10	108	4.4%
11 to 20	293	11.9%
21 to 30	358	14.6%
30 to 40	814	33.2%
More than 40	190	7.7%
NA	119	4.9%
<b>Ever Worked in Health-Related Job</b>		
Yes, RN	156	6.4%
Yes, RN (international)	27	1.1%
Yes, LVN	275	11.2%
Yes, Nursing Assistant/Aide	898	36.6%
Yes, Technologist/Technician	197	8.0%
Yes, EMT	42	1.7%
Yes, Psych Tech	22	0.9%
Yes, Medical Assistant	101	4.1%
Yes, Clerk/Administration	374	15.2%
Yes, Food Services/Housekeeping	66	2.7%
Yes, Other	146	6.0%
No	754	30.7%
NA	8	0.3%
Health-Related Job in Past 12 Months	s	
Yes	1,213	49.4%
No	420	17.1%
Never Worked in Health Care	754	30.7%
NA	66	2.7%

D3

Training and Recruitment of Participants

	# of Participants	% of Participants
Any Training in Health Care Field		
Yes, BSN	42	1.7%
Yes, RN	210	8.6%
Yes, RN (international)	23	0.9%
Yes, LVN	285	11.6%
Yes, HHA	130	5.3%
Yes, CNA	746	30.4%
Yes, Military	7	0.3%
Yes, Other Certified Profession	363	14.8%
Yes, Other	132	5.4%
No	709	28.9%
NA	178	7.3%
<b>How First Heard About NWI Program</b>		
Newspaper Ads	45	1.8%
Bulletin Boards	30	1.2%
Newsletter / Direct Mailing	106	4.3%
Someone Else	461	18.8%
TV, Radio	47	1.9%
Brochures / Marketing Materials	70	2.9%
Job Fair	31	1.3%
Web-Site	30	1.2%
At Work	780	31.8%
County Worker	134	5.5%
At School	489	19.9%
Career Center	65	2.6%
Union	41	1.7%
Other	42	1.7%

D4

Profile of Participants by Program Site

	Number of NWI Partici- pants	Mean Age	% Married	% w/Child	% Intend to Work	Mean Weeks Worked*	% Worked in Past Week	Health Care Job— Ever	Health Care Job— Recent*
All Participants	2,453	33.6	44.8%	53.3%	85.0%	37.0	75.5%	68.4%	50.8%
Regional Sites									
Kern	75	31.3	41.3%	53.3%	85.1%	37.3	78.7%	81.3%	70.7%
LA Works	69	26.4	29.4%	21.7%	91.3%	33.4	100.0%	80.9%	64.7%
NBEC	222	34.2	47.0%	46.2%	74.1%	35.8	66.8%	64.5%	48.2%
Orange County	364	34.0	48.6%	47.5%	93.7%	39.0	89.0%	69.7%	41.7%
Other, North	104	33.0	48.5%	62.1%	96.9%	41.9	88.5%	84.5%	74.8%
Other, South	137	32.8	39.1%	52.9%	73.6%	31.6	65.4%	72.2%	54.9%
Riverside	93	38.7	60.2%	60.4%	97.7%	47.5	94.6%	84.6%	57.1%
Sacramento	133	34.5	49.6%	55.7%	93.7%	44.8	91.0%	72.0%	68.9%
Saddleback	256	40.9	58.4%	64.7%	97.4%	49.3	99.4%	55.1%	27.1%
San Diego	180	34.9	45.3%	46.7%	97.8%	45.9	86.7%	92.7%	82.1%
San Francisco	50	37.2	73.5%	62.0%	65.2%	30.7	50.0%	73.3%	44.4%
Santa Clara	126	32.5	41.9%	36.5%	84.5%	35.4	63.5%	64.5%	47.6%
SELACO	238	33.5	39.2%	67.8%	85.2%	30.9	64.4%	69.2%	55.1%
West Hills	251	29.4	36.0%	57.7%	76.6%	30.7	62.9%	65.3%	51.6%
West Hills, Psych Tech * In past 12 mon	155	30.0	30.7%	56.3%	48.4%	19.2	32.2%	28.8%	15.7%

Note: reported means and percentages are based on NWI baseline surveys with valid responses for the relevant question.

**Demographic Characteristics of Participants by Type of Training** 

**D5** 

	ADN RN	BSN RN	LVN	LVN- to-RN	Other	Preceptor	Psych Tech	RN-to-BSN	Specialty	Unknown	Pre- RN
No. of Participants	592	171	466	180	105	256	146	104	286	84	63
Regional Sites											
Kern	1.7%	3.5%	9.7%	1.7%	0.0%	0.0%	5.5%	0.0%	0.0%	3.6%	0.0%
LA Works	0.5%	2.9%	0.0%	0.0%	0.0%	0.0%	0.0%	1.0%	19.6%	4.8%	0.0%
NBEC	17.6%	15.2%	2.8%	6.1%	7.6%	0.0%	15.1%	28.8%	0.0%	7.1%	3.2%
Orange County	8.6%	9.4%	3.6%	10.6%	1.9%	0.0%	0.0%	24.0%	77.6%	1.2%	17.5%
Other, North	10.0%	1.2%	5.8%	5.6%	2.9%	0.0%	0.0%	1.0%	0.0%	2.4%	0.0%
Other, South	10.1%	2.9%	8.8%	1.7%	2.9%	0.0%	0.0%	4.8%	0.3%	14.3%	11.1%
Riverside	0.7%	9.4%	2.4%	2.8%	19.0%	0.0%	0.0%	26.9%	0.0%	3.6%	9.5%
Sacramento	10.3%	10.5%	6.0%	11.7%	1.9%	0.0%	0.0%	1.0%	0.0%	1.2%	1.6%
Saddleback	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
San Diego	10.3%	9.4%	6.7%	14.4%	19.0%	0.0%	0.0%	0.0%	1.7%	7.1%	23.8%
San Francisco	0.7%	0.0%	0.6%	2.2%	21.0%	0.0%	0.0%	0.0%	0.0%	20.2%	0.0%
Santa Clara	18.2%	0.0%	0.0%	3.9%	0.0%	0.0%	0.0%	3.8%	0.0%	0.0%	11.1%
SELACO	4.4%	4.1%	23.0%	28.9%	12.4%	0.0%	0.0%	1.9%	0.7%	23.8%	14.3%
West Hills	5.1%	31.6%	28.3%	10.6%	0.0%	0.0%	0.0%	6.7%	0.0%	4.8%	7.9%
West Hills, Psych Tech	1.9%	0.0%	2.4%	0.0%	11.4%	0.0%	79.5%	0.0%	0.0%	6.0%	0.0%
Age	ı										
Less Than 25	17.4%	32.2%	22.3%	8.3%	19.0%	0.4%	39.7%	12.5%	21.7%	15.5%	25.4%
25 to 30	24.5%	17.5%	20.2%	17.2%	14.3%	7.4%	19.9%	14.4%	21.7%	19.0%	15.9%
30 to 35	17.2%	14.6%	21.2%	16.7%	19.0%	13.3%	8.2%	21.2%	25.2%	15.5%	22.2%
35 to 40	14.5%	8.2%	11.8%	18.3%	13.3%	9.8%	7.5%	11.5%	11.9%	16.7%	12.7%
40 to 45	9.1%	10.5%	7.9%	12.8%	18.1%	8.6%	8.2%	12.5%	8.0%	13.1%	11.1%
Over 45	11.3%	9.9%	13.3%	25.0%	15.2%	25.4%	16.4%	26.0%	10.8%	17.9%	11.1%
NA	5.9%	7.0%	3.2%	1.7%	1.0%	35.2%	0.0%	1.9%	0.7%	2.4%	1.6%

	ADN RN	BSN RN	LVN	LVN- to-RN	Other	Preceptor	Psych Tech	RN-to-BSN	Specialty	Unknown	Pre- RN
Mean Age	32.7	31.0	32.5	37.1	34.5	40.9	30.6	36.7	32.2	34.7	31.8
Marital Status											
Married	39.9%	38.6%	37.3%	51.7%	52.4%	39.5%	32.2%	69.2%	43.4%	47.6%	46.0%
Separated	3.5%	1.8%	6.7%	5.6%	3.8%	3.1%	6.2%	2.9%	2.8%	10.7%	11.1%
Divorced	10.0%	12.3%	11.8%	15.6%	9.5%	12.1%	15.8%	5.8%	6.6%	9.5%	7.9%
Widowed	0.5%	0.6%	0.6%	1.7%	1.0%	1.6%	0.0%	0.0%	0.3%	0.0%	0.0%
Never Married	44.3%	45.0%	39.7%	24.4%	29.5%	11.3%	43.2%	18.3%	44.1%	29.8%	33.3%
NA	1.9%	1.8%	3.9%	1.1%	3.8%	32.4%	2.7%	3.8%	2.8%	2.4%	1.6%
Have Child											
Yes	46.1%	33.9%	60.9%	67.8%	56.2%	43.8%	51.4%	58.7%	40.6%	57.1%	65.1%
No	53.2%	66.1%	37.3%	31.1%	41.0%	23.8%	46.6%	40.4%	58.4%	40.5%	34.9%
NA	0.7%	0.0%	1.7%	1.1%	2.9%	32.4%	2.1%	1.0%	1.0%	2.4%	0.0%
Own Car											
Yes	94.4%	89.5%	82.6%	95.0%	76.2%	68.0%	85.6%	89.4%	94.1%	73.8%	84.1%
No	3.7%	8.8%	15.0%	3.9%	17.1%	0.8%	12.3%	4.8%	4.9%	20.2%	15.9%
NA	1.9%	1.8%	2.4%	1.1%	6.7%	31.3%	2.1%	5.8%	1.0%	6.0%	0.0%
Intend to W	ork Du	ring Pi	rogram								
Yes, Full- Time	15.5%	26.9%	19.5%	33.3%	35.2%	51.2%	20.5%	48.1%	82.2%	38.1%	30.2%
Yes, Part- Time	61.0%	57.9%	44.4%	52.8%	28.6%	7.0%	30.1%	30.8%	11.2%	39.3%	44.4%
No	13.7%	5.3%	23.0%	4.4%	19.0%	1.6%	33.6%	14.4%	2.4%	13.1%	11.1%
NA	9.8%	9.9%	13.1%	9.4%	17.1%	40.2%	15.8%	6.7%	4.2%	9.5%	14.3%

D6
Work Profile of Participants by Training Type

	ADN RN	BSN RN		LVN- to-RN	Other	Preceptor	Psych Tech	RN-to- BSN	Specialty	Unknown	Pre- RN
No. of Participants	592	171	466	180	105	256	146	104	286	84	63
Weeks Worked i	in Past 1	2 Mont	hs								
None	13.0%	11.1%	17.0%	5.0%	13.3%	0.0%	22.6%	10.6%	2.8%	15.5%	11.1%
Less Than 26	11.5%	14.0%	14.2%	7.8%	11.4%	2.3%	21.2%	8.7%	23.4%	11.9%	7.9%
At least 26	75.5%	74.9%	68.9%	87.2%	75.2%	97.7%	56.2%	80.8%	73.8%	72.6%	81.0%
Mean Weeks Worked	38.2	36.4	32.4	42.4	35.2	49.3	26.9	39.3	37.0	31.5	37.5
Hours Worked i	n Past V	Veek									
None	25.8%	18.1%	37.1%	13.3%	32.4%	0.4%	50.0%	24.0%	4.9%	29.8%	28.6%
1 to 10	7.9%	7.6%	5.8%	3.9%	2.9%	0.0%	2.1%	4.8%	0.0%	2.4%	1.6%
11 to 20	20.4%	17.5%	12.2%	12.8%	5.7%	1.6%	15.8%	7.7%	2.1%	8.3%	12.7%
21 to 30	21.8%	18.1%	12.4%	17.2%	12.4%	6.3%	11.6%	11.5%	12.2%	10.7%	11.1%
30 to 40	20.1%	26.9%	24.9%	40.6%	41.0%	41.8%	13.0%	40.4%	67.8%	39.3%	34.9%
More than 40	3.4%	11.1%	4.9%	11.1%	3.8%	18.8%	3.4%	10.6%	10.5%	4.8%	9.5%
NA	0.5%	0.6%	2.6%	1.1%	1.9%	31.3%	4.1%	1.0%	2.4%	4.8%	1.6%
Ever Worked in	Health-	Related	Job								
Yes, RN	0.7%	7.0%	0.0%	1.1%	4.8%	27.7%	0.0%	22.1%	10.5%	8.3%	3.2%
Yes, RN (international)	0.0%	1.2%	0.2%	2.2%	13.3%	0.0%	0.0%	0.0%	0.3%	6.0%	0.0%
Yes, LVN	6.4%	5.8%	3.9%	67.8%	12.4%	4.7%	0.7%	10.6%	11.5%	15.5%	6.3%
Yes, Nursing Assistant/Aide	30.4%	33.3%	56.0%	37.8%	45.7%	20.7%	21.2%	30.8%	40.9%	38.1%	30.2%
Yes, Technologist/ Technician	12.0%	10.5%	6.7%	3.9%	7.6%	5.1%	4.1%	10.6%	7.0%	6.0%	11.1%
Yes, EMT	3.0%	1.8%	1.9%	0.6%	1.0%	0.8%	0.0%	1.0%	1.4%	0.0%	4.8%
Yes, Psych Tech	0.8%	0.6%	0.0%	0.0%	1.0%	0.8%	8.2%	0.0%	0.3%	0.0%	0.0%
Yes, Medical Assistant	5.6%	2.3%	7.3%	1.7%	1.0%	2.3%	1.4%	3.8%	3.1%	2.4%	4.8%
Yes, Clerk/Admini- stration	21.5%	17.5%	15.5%	8.3%	11.4%	8.2%	8.2%	17.3%	15.0%	16.7%	15.9%
Yes, Food Services/House- keeping	2.9%	2.3%	3.4%	2.2%	1.9%	2.3%	3.4%	1.9%	1.4%	7.1%	0.0%
Yes, Other	8.4%	6.4%	2.8%	2.2%	3.8%	5.9%	3.4%	8.7%	9.4%	4.8%	6.3%
No	31.4%	35.1%	22.5%	14.4%	29.5%	39.5%	63.0%	24.0%	28.3%	32.1%	31.7%
NA	0.3%	0.6%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	1.2%	0.0%

	ADN RN	BSN RN	LVN	LVN- to-RN	Other	Preceptor	Psych Tech	RN-to- BSN	Specialty	Unknown	Pre- RN
Health-Related	Job in Pa	ast 12 M	Ionths								
Yes	54.6%	46.2%	59.7%	76.1%	50.5%	23.8%	24.0%	46.2%	42.7%	48.8%	57.1%
No	13.2%	17.5%	16.5%	7.2%	17.1%	24.6%	11.6%	27.9%	26.9%	14.3%	9.5%
Never Worked in Health Care	31.4%	35.1%	22.5%	14.4%	29.5%	39.5%	63.0%	24.0%	28.3%	32.1%	31.7%
NA	0.8%	1.2%	1.3%	2.2%	2.9%	12.1%	1.4%	1.9%	2.1%	4.8%	1.6%
Any Training in	Health	Care Fi	eld								
Yes, RN	0.5%	9.9%	0.2%	1.7%	2.9%	33.6%	0.0%	29.8%	20.3%	7.1%	3.2%
Yes, RN (international)	0.0%	0.0%	0.0%	1.1%	14.3%	0.0%	0.0%	0.0%	0.7%	4.8%	0.0%
Yes, LVN	7.3%	7.6%	2.1%	76.7%	11.4%	3.1%	1.4%	7.7%	12.2%	13.1%	7.9%
Yes, HHA	3.9%	5.3%	12.7%	7.8%	2.9%	0.8%	3.4%	1.9%	1.4%	7.1%	4.8%
Yes, CNA	22.8%	23.4%	62.7%	28.3%	41.0%	9.4%	24.7%	21.2%	20.6%	32.1%	27.0%
Yes, Military	0.3%	0.6%	0.6%	0.0%	1.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Yes, Other Certified Profession	23.0%	11.7%	20.0%	6.7%	12.4%	6.3%	8.2%	14.4%	8.0%	10.7%	22.2%
Yes, Other	7.4%	7.6%	4.5%	1.1%	4.8%	5.9%	5.5%	4.8%	3.8%	2.4%	9.5%
No	39.9%	42.7%	16.3%	10.0%	20.0%	12.5%	58.2%	25.0%	33.6%	32.1%	30.2%
NA	3.5%	3.5%	2.4%	1.7%	9.5%	37.1%	4.8%	4.8%	4.9%	6.0%	1.6%

D7
Recruiting and Assistance Profile by Training Type

	ADN RN	BSN RN	LVN	LVN- to-RN	Other	Preceptor	Psych Tech	RN-to- BSN	Specialty	Unknown	Pre- RN
No. of Participants	592	171	466	180	105	256	146	104	286	84	63
No. of Responses	569	150	468	178	97	183	191	103	289	79	64
How First Hea	ard Abo	ut NWI	Progran	n							
Newspaper Ads	0.7%	0.6%	0.4%	0.0%	1.0%	0.0%	21.9%	0.0%	0.3%	4.8%	0.0%
Bulletin Boards	0.8%	1.2%	0.9%	0.6%	0.0%	2.3%	6.2%	0.0%	0.3%	1.2%	1.6%
Newsletter / Direct Mailing	6.9%	3.5%	5.8%	5.0%	1.9%	1.6%	4.8%	3.8%	1.0%	2.4%	1.6%
Someone Else	18.4%	22.2%	22.7%	13.9%	21.0%	5.5%	45.9%	15.4%	9.1%	21.4%	31.7%
TV, Radio	1.0%	4.1%	2.6%	5.0%	1.9%	0.4%	1.4%	1.0%	0.0%	7.1%	1.6%
Brochures / Marketing Materials	2.0%	1.8%	1.5%	0.0%	1.0%	7.0%	8.2%	3.8%	3.5%	2.4%	1.6%
Job Fair	1.5%	3.5%	0.4%	0.0%	0.0%	0.0%	3.4%	1.0%	2.4%	1.2%	0.0%
Web-Site	0.5%	3.5%	1.5%	0.0%	1.0%	0.0%	2.1%	0.0%	1.7%	4.8%	1.6%
At Work	24.5%	24.6%	11.6%	31.1%	36.2%	49.2%	8.9%	40.4%	76.6%	26.2%	36.5%
County Worker	3.5%	7.6%	8.4%	0.6%	6.7%	4.3%	8.9%	12.5%	2.8%	4.8%	6.3%
At School	29.9%	12.3%	32.2%	32.8%	11.4%	1.2%	15.8%	20.2%	2.1%	9.5%	14.3%
Career Center	3.5%	1.8%	5.6%	1.1%	4.8%	0.0%	1.4%	0.0%	0.0%	4.8%	3.2%
Union	1.7%	0.6%	1.5%	7.2%	3.8%	0.0%	1.4%	1.0%	0.3%	2.4%	0.0%
Other	1.0%	0.6%	5.4%	1.7%	1.9%	0.0%	0.7%	0.0%	0.7%	1.2%	1.6%
Assistance Off	ered Du	ıring Tr	aining								
Childcare	3.4%	3.5%	9.2%	1.7%	4.8%	0.8%	16.4%	2.9%	2.4%	1.2%	1.6%
Transportation	3.7%	2.9%	9.4%	1.7%	9.5%	0.0%	17.8%	1.9%	1.7%	4.8%	4.8%
Tutoring	9.0%	4.7%	11.8%	8.3%	3.8%	0.4%	28.8%	2.9%	0.7%	3.6%	3.2%
Books and Supplies	33.8%	20.5%	39.9%	28.9%	41.9%	8.6%	44.5%	20.2%	8.7%	38.1%	31.7%
Tuition Assistance	50.0%	45.6%	42.5%	34.4%	36.2%	5.5%	48.6%	41.3%	10.5%	20.2%	41.3%
Paid Time Off	0.2%	0.0%	0.0%	1.7%	1.0%	6.3%	0.0%	0.0%	0.3%	1.2%	0.0%
Other	5.1%	1.8%	2.8%	3.3%	5.7%	1.6%	6.2%	3.8%	7.7%	3.6%	1.6%

	ADN RN	BSN RN	LVN	LVN- to-RN	Other	Preceptor	Psych Tech	RN-to- BSN	Specialty	Unknown	Pre- RN
Assistance Nec	eded Du	ring Tra	aining								
Childcare	11.5%	9.4%	12.7%	13.9%	10.5%	1.2%	15.1%	10.6%	3.5%	10.7%	14.3%
Transportation	13.0%	15.8%	15.5%	13.3%	15.2%	0.0%	15.8%	14.4%	1.4%	23.8%	17.5%
Tutoring	13.5%	8.2%	9.4%	16.7%	17.1%	0.0%	17.8%	9.6%	2.1%	8.3%	11.1%
Books and Supplies	46.8%	49.1%	44.0%	46.1%	41.0%	0.0%	40.4%	45.2%	1.4%	42.9%	63.5%
Tuition Assistance	37.8%	46.8%	38.6%	51.1%	36.2%	0.4%	34.2%	42.3%	3.5%	19.0%	63.5%
Paid Time Off	1.4%	0.0%	1.3%	2.8%	0.0%	0.4%	0.7%	0.0%	0.3%	0.0%	0.0%
License Fee	2.4%	4.1%	0.6%	2.2%	3.8%	0.0%	4.8%	3.8%	0.0%	4.8%	0.0%
Housing / Living Expenses	2.7%	1.8%	0.6%	0.6%	1.0%	0.0%	0.7%	0.0%	0.0%	1.2%	1.6%
Other	2.2%	1.8%	4.1%	1.7%	7.6%	0.0%	7.5%	1.9%	3.8%	7.1%	1.6%

D8

Demographic Characteristics of Participants by Site

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle- back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
No. of Participants	75	69	222	364	104	137	93	133	256	180	50	126	238	251	155
Age (as of 1-1-04)															
Less Than 25	30.7%	53.6%	13.5%	14.8%	17.3%	22.6%	10.8%	12.8%	0.4%	10.0%	4.0%	11.1%	19.7%	35.9%	43.9%
25 to 30	26.7%	24.6%	22.5%	20.9%	19.2%	21.9%	10.8%	23.3%	7.4%	25.0%	12.0%	24.6%	15.5%	19.5%	16.1%
30 to 35	13.3%	14.5%	20.7%	23.9%	26.9%	18.2%	17.2%	12.0%	13.3%	20.0%	14.0%	12.7%	23.9%	15.5%	10.3%
35 to 40	8.0%	2.9%	11.3%	15.1%	15.4%	12.4%	14.0%	15.8%	9.8%	15.6%	32.0%	11.9%	12.2%	11.6%	5.8%
40 to 45	6.7%	4.3%	14.4%	10.4%	11.5%	8.0%	14.0%	13.5%	8.6%	12.2%	16.0%	7.9%	8.0%	6.8%	5.8%
Over 45	14.7%	0.0%	15.3%	14.3%	8.7%	15.3%	33.3%	15.0%	25.4%	16.7%	20.0%	8.7%	16.8%	6.0%	17.4%
NA	0.0%	0.0%	2.3%	0.5%	1.0%	1.5%	0.0%	7.5%	35.2%	0.6%	2.0%	23.0%	3.8%	4.8%	0.6%
Mean Age	31.3	26.4	34.2	34.0	33.0	32.8	38.7	34.5	40.9	34.9	37.2	32.5	33.5	29.4	30.0
Marital Status															
Married	41.3%	29.0%	46.4%	47.3%	47.1%	38.0%	57.0%	48.1%	39.5%	45.0%	72.0%	41.3%	38.2%	34.3%	29.7%
Separated	6.7%	0.0%	1.8%	4.4%	9.6%	5.8%	3.2%	6.0%	3.1%	3.9%	4.0%	2.4%	8.0%	3.6%	7.1%
Divorced	17.3%	5.8%	10.8%	9.3%	8.7%	5.1%	14.0%	8.3%	12.1%	16.7%	2.0%	10.3%	11.3%	10.4%	14.2%
Widowed	0.0%	0.0%	0.9%	0.0%	0.0%	0.7%	1.1%	0.8%	1.6%	0.6%	2.0%	0.8%	1.3%	0.4%	0.0%
Never Married	34.7%	63.8%	38.7%	36.3%	31.7%	47.4%	19.4%	33.8%	11.3%	33.3%	18.0%	43.7%	38.7%	46.6%	45.8%
NA	0.0%	1.4%	1.4%	2.7%	2.9%	2.9%	5.4%	3.0%	32.4%	0.6%	2.0%	1.6%	2.5%	4.8%	3.2%
Have Child															
Yes	53.3%	21.7%	45.9%	47.0%	61.5%	52.6%	59.1%	54.9%	43.8%	46.7%	62.0%	36.5%	65.5%	57.0%	54.8%
No	46.7%	78.3%	53.6%	51.9%	37.5%	46.7%	38.7%	43.6%	23.8%	53.3%	38.0%	63.5%	31.1%	41.8%	42.6%

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle- back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
Have Child (Co	ntinued	)													
NA	0.0%	0.0%	0.5%	1.1%	1.0%	0.7%	2.2%	1.5%	32.4%	0.0%	0.0%	0.0%	3.4%	1.2%	2.6%
Own Car															
Yes	93.3%	92.8%	94.1%	93.7%	91.3%	88.3%	90.3%	97.7%	68.0%	96.7%	58.0%	94.4%	73.1%	84.5%	82.6%
No	6.7%	5.8%	2.3%	5.5%	7.7%	8.8%	3.2%	0.8%	0.8%	2.2%	34.0%	4.0%	23.1%	13.1%	15.5%
NA	0.0%	1.4%	3.6%	0.8%	1.0%	2.9%	6.5%	1.5%	31.3%	1.1%	8.0%	1.6%	3.8%	2.4%	1.9%
Intend to Work	Full-T	ime													
Yes, Full-Time	29.3%	89.9%	19.8%	62.9%	15.4%	24.8%	65.6%	21.8%	51.2%	30.0%	12.0%	4.8%	29.4%	17.1%	10.3%
Yes, Part-Time	46.7%	1.4%	47.3%	22.5%	76.0%	40.1%	25.8%	67.7%	7.0%	66.7%	48.0%	69.0%	38.2%	49.4%	28.4%
No	13.3%	8.7%	23.4%	5.8%	2.9%	23.4%	2.2%	6.0%	1.6%	2.2%	32.0%	13.5%	11.8%	20.3%	41.3%
NA	10.7%	0.0%	9.5%	8.8%	5.8%	11.7%	6.5%	4.5%	40.2%	1.1%	8.0%	12.7%	20.6%	13.1%	20.0%

<sup>\*</sup>Other (N)=East Bay, Madera, Stanislaus \*Other (S)=Hollywood, San Bernardino, Santa Barbara

D9
Work Profile of Participants by Site

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle -back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
No. of Participants	75	69	222	364	104	137	93	133	256	180	50	126	238	251	155
Weeks Worked in I	Past 12	Months													
None	8.0%	2.9%	17.1%	4.9%	5.8%	16.8%	3.2%	6.8%	0.0%	3.3%	20.0%	15.1%	15.1%	17.5%	32.3%
Less Than 26	20.0%	30.4%	9.9%	16.5%	11.5%	13.9%	2.2%	6.8%	2.3%	3.3%	12.0%	15.9%	13.9%	17.9%	23.2%
At least 26	72.0%	66.7%	73.0%	78.6%	82.7%	69.3%	94.6%	86.5%	97.7%	93.3%	68.0%	69.0%	71.0%	64.5%	44.5%
Mean Weeks Worked	37.3	33.4	35.8	39.0	41.9	31.6	47.5	44.8	49.3	45.9	30.7	35.4	30.9	30.7	19.2
Hours Worked in P	Past We	eek													
None	21.3%	0.0%	32.9%	10.7%	11.5%	33.6%	5.4%	9.0%	0.4%	13.3%	48.0%	36.5%	33.6%	36.7%	65.2%
1 to 10	2.7%	0.0%	7.2%	2.2%	11.5%	7.3%	1.1%	4.5%	0.0%	8.3%	2.0%	10.3%	2.1%	5.6%	3.2%
11 to 20	17.3%	1.4%	21.2%	6.3%	24.0%	16.1%	6.5%	12.0%	1.6%	17.8%	10.0%	27.8%	6.3%	14.7%	7.7%
21 to 30	13.3%	8.7%	12.6%	12.9%	31.7%	17.5%	8.6%	28.6%	6.3%	20.6%	10.0%	19.0%	9.2%	15.5%	13.5%
30 to 40	36.0%	85.5%	21.6%	54.9%	19.2%	21.2%	53.8%	42.9%	41.8%	31.7%	24.0%	6.3%	34.0%	20.7%	4.5%
More than 40	9.3%	4.3%	3.6%	10.7%	1.9%	1.5%	23.7%	3.0%	18.8%	8.3%	2.0%	0.0%	9.2%	5.6%	1.9%
NA	0.0%	0.0%	0.9%	2.2%	0.0%	2.9%	1.1%	0.0%	31.3%	0.0%	4.0%	0.0%	5.5%	1.2%	3.9%
Ever Worked in He	ealth-R	elated J	ob												1
Yes, RN	1.3%	1.4%	0.5%	9.6%	1.0%	0.7%	22.6%	1.5%	27.7%	8.3%	4.0%	0.0%	2.1%	0.0%	0.0%
Yes, RN (international)	0.0%	0.0%	1.4%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.0%	0.0%	0.8%	0.0%	0.0%
Yes, LVN	6.7%	5.8%	0.0%	15.1%	15.4%	5.8%	8.6%	15.8%	4.7%	30.0%	18.0%	4.0%	22.3%	9.2%	1.3%
Yes, Nursing Assistant/Aide	68.0%	63.8%	29.3%	35.4%	44.2%	38.7%	44.1%	28.6%	20.7%	55.6%	42.0%	28.6%	31.9%	46.6%	18.1%
Yes, Technologist/ Technician	6.7%	8.7%	8.1%	8.2%	16.3%	8.8%	12.9%	8.3%	5.1%	9.4%	8.0%	12.7%	4.6%	7.2%	4.5%

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle -back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
Yes, EMT	4.0%	0.0%	1.8%	1.9%	3.8%	2.9%	3.2%	3.0%	0.8%	1.1%	0.0%	2.4%	0.8%	1.2%	0.6%
Yes, Psych Tech	8.0%	0.0%	2.3%	0.5%	0.0%	1.5%	1.1%	0.0%	0.8%	0.6%	0.0%	0.0%	0.0%	0.4%	1.3%
Yes, Medical Assistant	1.3%	1.4%	7.2%	3.8%	6.7%	5.1%	2.2%	8.3%	2.3%	6.1%	0.0%	1.6%	5.9%	2.8%	1.3%
Yes, Clerk / Administration	16.0%	21.7%	14.0%	15.4%	27.9%	15.3%	20.4%	12.0%	8.2%	19.4%	2.0%	27.0%	14.3%	14.3%	9.0%
Yes, Food Services/House- keeping	6.7%	1.4%	3.2%	2.5%	3.8%	2.9%	3.2%	3.0%	2.3%	2.8%	2.0%	1.6%	2.5%	1.6%	3.2%
Yes, Other	1.3%	10.1%	9.5%	7.1%	6.7%	8.8%	5.4%	5.3%	5.9%	5.0%	2.0%	14.3%	3.8%	0.8%	3.9%
No	80.0%	81.2%	64.4%	70.1%	83.7%	73.0%	84.9%	72.2%	60.5%	92.2%	76.0%	64.3%	69.3%	65.3%	29.7%
NA	1.3%	0.0%	0.5%	0.3%	1.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.8%	0.4%	0.4%	0.0%
<b>Health-Related Job</b>	in Pas	t 12 Mo	nths												
Yes	70.7%	63.8%	47.7%	40.9%	74.0%	53.3%	55.9%	68.4%	23.8%	81.7%	40.0%	46.8%	54.2%	51.0%	15.5%
No	10.7%	15.9%	16.2%	27.5%	9.6%	16.8%	26.9%	3.0%	24.6%	10.6%	26.0%	16.7%	13.9%	13.5%	12.9%
Never Worked in Health Care	18.7%	18.8%	35.1%	29.7%	15.4%	27.0%	15.1%	27.8%	39.5%	7.2%	24.0%	34.9%	30.3%	34.3%	70.3%
NA	0.0%	1.4%	0.9%	1.9%	1.0%	2.9%	2.2%	0.8%	12.1%	0.6%	10.0%	1.6%	1.7%	1.2%	1.3%
Any Training in He	alth C	are Field	i												
Yes, BSN	0.0%	4.3%	0.5%	1.9%	0.0%	2.2%	1.1%	0.0%	9.4%	1.1%	0.0%	0.0%	0.4%	0.0%	0.0%
Yes, RN	0.0%	15.9%	0.0%	16.2%	0.0%	1.5%	36.6%	0.0%	33.6%	7.2%	0.0%	0.0%	2.1%	0.0%	0.0%
Yes, RN (international)	0.0%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.0%	0.0%	0.0%	0.0%	0.0%
Yes, LVN	6.7%	4.3%	10.4%	14.3%	14.4%	5.1%	7.5%	15.8%	3.1%	28.9%	14.0%	6.3%	23.9%	7.2%	1.3%
Yes, HHA	5.3%	2.9%	3.2%	3.3%	6.7%	13.9%	3.2%	0.8%	0.8%	6.1%	4.0%	2.4%	12.6%	8.8%	3.2%
Yes, CNA	68.0%	26.1%	25.7%	22.5%	44.2%	41.6%	32.3%	21.8%	9.4%	38.3%	40.0%	18.3%	30.7%	55.4%	18.1%
Yes, Military	1.3%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	1.1%	0.0%	0.8%	0.4%	0.4%	0.0%

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle -back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
Yes, Other Certified Profession	14.7%	10.1%	16.2%	9.3%	29.8%	21.2%	19.4%	27.1%	6.3%	20.0%	6.0%	23.0%	13.4%	12.7%	8.4%
Yes, Other	9.3%	10.1%	9.0%	3.6%	6.7%	8.0%	4.3%	3.0%	5.9%	5.6%	0.0%	11.1%	3.4%	2.4%	3.9%
No	17.3%	36.2%	45.5%	31.0%	21.2%	27.7%	9.7%	27.1%	12.5%	11.7%	12.0%	45.2%	27.3%	28.3%	64.5%
NA	0.0%	1.4%	5.9%	5.2%	3.8%	2.2%	6.5%	3.0%	37.1%	1.1%	12.0%	3.2%	5.0%	1.2%	3.9%

<sup>\*</sup>Other (N)=East Bay, Madera, Stanislaus \*Other (S)=Hollywood, San Bernardino, Santa Barbara

D10

Recruiting and Assistance Profile by Site

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle- back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
No. of Participants	75	69	222	364	104	137	93	133	256	180	50	126	238	251	155
No. of Responses	81	74	224	346	106	140	94	153	183	193	38	98	245	199	197
How First Heard A	bout NV	WI Prog	ram**												
Newspaper Ads	0.0%	0.0%	0.5%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	4.0%	0.8%	0.4%	1.6%	22.6%
Bulletin Boards	4.0%	0.0%	0.5%	0.5%	1.9%	1.5%	0.0%	0.0%	2.3%	1.7%	0.0%	0.8%	0.0%	0.4%	5.8%
Newsletter / Direct Mailing	9.3%	0.0%	5.9%	1.1%	3.8%	14.6%	1.1%	2.3%	1.6%	13.3%	0.0%	1.6%	0.8%	4.4%	7.1%
Someone Else	28.0%	14.5%	13.5%	11.0%	16.3%	29.9%	19.4%	23.3%	5.5%	18.3%	22.0%	35.7%	8.4%	23.1%	46.5%
TV, Radio	2.7%	0.0%	4.1%	0.0%	1.0%	0.0%	0.0%	0.8%	0.4%	0.0%	0.0%	0.0%	12.2%	1.2%	0.6%
Brochures / Marketing Materials	0.0%	1.4%	0.5%	3.8%	2.9%	0.7%	1.1%	3.8%	7.0%	0.6%	0.0%	3.2%	0.0%	2.4%	9.7%
Job Fair	0.0%	10.1%	1.8%	0.3%	1.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	4.0%	0.4%	2.0%	3.9%
Web-Site	0.0%	7.2%	0.0%	0.3%	0.0%	0.7%	0.0%	4.5%	0.0%	0.0%	4.0%	1.6%	1.3%	2.0%	3.2%
At Work	9.3%	56.5%	15.8%	64.6%	28.8%	17.5%	62.4%	32.3%	49.2%	60.0%	14.0%	7.1%	16.4%	5.6%	3.9%
County Worker	14.7%	5.8%	14.4%	1.9%	2.9%	2.2%	1.1%	4.5%	4.3%	8.9%	6.0%	1.6%	8.4%	3.2%	4.5%
At School	18.7%	10.1%	41.9%	9.6%	26.0%	29.2%	16.1%	24.8%	1.2%	3.9%	6.0%	19.0%	40.3%	26.7%	16.1%
Career Center	5.3%	0.0%	0.9%	0.5%	14.4%	0.7%	0.0%	10.5%	0.0%	0.0%	8.0%	0.8%	6.7%	2.0%	0.6%
Union	0.0%	0.0%	0.0%	0.3%	2.9%	1.5%	0.0%	5.3%	0.0%	0.0%	10.0%	0.8%	6.7%	1.6%	1.3%
Other	16.0%	1.4%	1.4%	0.8%	0.0%	2.9%	0.0%	3.0%	0.0%	0.6%	2.0%	0.8%	0.8%	3.2%	1.3%
Assistance Offered	During	Training	g												
Childcare	4.0%	5.8%	8.6%	1.4%	5.8%	6.6%	2.2%	0.8%	0.8%	6.1%	0.0%	0.8%	0.0%	10.0%	17.4%

	Kern	LA Works	NBEC	Orange County	Other (N)*	Other (S)*	Riverside	Sacra- mento	Saddle- back	San Diego	San Fran.	Santa Clara	SELACO	West Hills	W. H. Psych Tech
Assistance Offered	During	Trainin	g (Conti	nued)											
Transportation	10.7%	7.2%	12.6%	0.8%	2.9%	7.3%	3.2%	3.8%	0.0%	5.0%	4.0%	2.4%	4.6%	3.6%	16.1%
Tutoring	1.3%	2.9%	15.3%	3.8%	13.5%	10.9%	7.5%	1.5%	0.4%	10.6%	8.0%	0.8%	8.0%	6.8%	24.5%
Books and Supplies	53.3%	10.1%	55.4%	15.4%	57.7%	55.5%	28.0%	39.1%	8.6%	21.7%	94.0%	10.3%	19.3%	17.5%	32.9%
Tuition Assistance	40.0%	8.7%	65.8%	20.9%	65.4%	43.1%	54.8%	72.2%	5.5%	37.2%	26.0%	34.1%	30.3%	28.7%	38.7%
Paid Time Off	0.0%	0.0%	0.0%	0.5%	0.0%	0.7%	0.0%	2.3%	6.3%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%
Other	0.0%	2.9%	5.4%	6.3%	6.7%	2.9%	3.2%	4.5%	1.6%	2.8%	4.0%	7.9%	2.5%	2.8%	6.5%
Assistance Needed 1	During '	Training	,												
Childcare	4.0%	4.3%	14.9%	4.9%	18.3%	16.1%	6.5%	5.3%	1.2%	6.7%	4.0%	13.5%	19.3%	11.6%	14.8%
Transportation	14.7%	1.4%	31.5%	3.0%	16.3%	21.9%	6.5%	23.3%	0.0%	3.3%	26.0%	6.3%	16.0%	7.6%	18.1%
Tutoring	2.7%	0.0%	20.7%	6.9%	5.8%	13.9%	17.2%	8.3%	0.0%	4.4%	12.0%	13.5%	16.0%	8.0%	18.1%
Books and Supplies	60.0%	2.9%	59.9%	1.4%	40.4%	51.1%	44.1%	63.9%	0.0%	61.7%	8.0%	46.0%	42.0%	48.2%	39.4%
Tuition Assistance	40.0%	8.7%	45.9%	12.1%	30.8%	40.1%	50.5%	36.1%	0.4%	61.1%	18.0%	36.5%	44.1%	36.7%	31.0%
Paid Time Off	0.0%	1.4%	0.0%	0.0%	1.9%	0.7%	0.0%	9.0%	0.4%	0.0%	2.0%	0.0%	0.8%	0.4%	0.6%
License Fee	4.0%	0.0%	17.1%	0.0%	0.0%	1.5%	0.0%	1.5%	0.0%	0.6%	2.0%	0.0%	0.0%	0.0%	0.0%
Housing / Living Expenses	0.0%	0.0%	1.4%	0.8%	1.0%	1.5%	0.0%	5.3%	0.0%	1.1%	2.0%	3.2%	0.0%	1.2%	0.6%
Other	0.0%	4.3%	0.5%	2.7%	7.7%	1.5%	1.1%	5.3%	0.0%	8.3%	2.0%	0.0%	5.5%	1.6%	7.7%

<sup>\*</sup>Other (N)=East Bay, Madera, Stanislaus; Other (S)=Hollywood, San Bernardino, Santa Barbara \*\* Columns do not add to 100% because categories are not mutually exclusive, and/or there are missing values.

## APPENDIX E

## Acronym Glossary

ADN Associate Degree in Nursing

BSN Bachelor of Science in Nursing

CAHF California Association of Healthcare Facilities

CCSF City College of San Francisco

CHHS California Health and Human Services Agency

CHLA Children's Hospital of Los Angeles

CNA Certified Nurses Assistant or California Nurses Association

CTI Caregiver Training Initiative

CTS Comprehensive Training Systems

DET Department of Employment and Training

EDD Employment Development Department

HASD&IC Health Association of San Diego and Imperial Counties

ICOET Imperial County Office of Employment Training

IPND Cedars-Sinai Medical Center Institute for Professional Nursing Development

IVC Imperial Valley College

JVS Jewish Vocational Services

JTO Job Training Office

LVN Licensed Vocational Nurse

NBEC North Bay Employment Connection

NCEN Northern California Employment Network

NCLEX National Council Licensure Examination

NOVA North Valley (Works)

NWI Nurse Workforce Initiative

OCL On-site Career Ladder program

PCA Patient Care Assistant

PIC Private Industry Council

RHORC Regional Health Occupations Resource Center

RN Registered Nurse

ROP Regional Occupation Program

RTC Regional Training Collaborative

SDSU San Diego State University

SEIU Service Employees International Union

SELACO South East Los Angeles County (Workforce Investment Board)

SETA Sacramento Employment & Training Agency

TEC Training and Employment Center

UCLA University of California, Los Angeles

UCSF University of California, San Francisco

WIA Workforce Investment Act

WIB Workforce Investment Board

WR Workplace Reform